

*New Jersey Department of Environmental Protection
Air Quality Permitting Program*

Instructions for:

*Application Forms for Air Pollution Control
Permits/Certificates, and Operating Permits*

Pursuant to N.J.A.C. 7:27-8 and -22



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Contents •

• • • • • • • • • • • • • •

Completing the Certification
Form.....36

Appendices

Appendix A: AIMS099 - Form: Facility ID and PIN Code Assignment for RADIUS Submittal

Appendix B: Control Device Inventory Information Forms (Details Window) Instructions

Appendix C: Equipment Inventory Information Forms (Details Window) Instructions

Appendix D: Control Device Operating Scenario/BPOS Step Information Forms (Details Windows) Instructions

Appendix E: Equipment Emission Unit/ Operating Scenario Information Form (Details Window) Instructions

Appendix F: Compliance Plan Codes

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Preparing Permit Applications

Introduction

This application package implements both New Jersey State air pollution control permit rules (N.J.A.C. 7:27-8 Permits and Certificates, and N.J.A.C. 7:27-22 Operating Permits) for permitting equipment and operations at facilities in New Jersey.

Attached to these instructions is a guidance document which is intended to help applicants understand certain basic principles of how to permit equipment under the air pollution control laws. It helps to further explain through examples the terms and procedures that are helpful in preparing an air pollution control application. We hope you read this document to answer some of your many questions.

At any time, if you need assistance in completing an application form, help desks are available to answer your questions from 8:30 AM to 4:30 PM on business days. The help desks are provided by the New Jersey State Department of Environmental Protection, Air Quality Permit Program. Questions regarding preconstruction permits can be answered by calling 1-800-441-0065 (New Jersey calls only), or 609-633-2829 (outside New Jersey, or within New Jersey). Questions regarding Operating Permits can be answered by calling 609-633-8248.

The process of preparing permit applications consists of two major tasks:

- Preparing permit application forms.
- Preparing the compliance plan and related permit requirements.

Each permit application should include general information about a facility, and specific information about emissions, equipment, control devices, and stack parameters. This chapter provides instructions on how to perform both of these tasks.

Before starting to complete a permit application, it will be necessary for you to obtain certain information from the Department from the phone numbers provided in the introduction to this manual. You will need to obtain the following:

1. A facility Identification number,
2. For permit modifications, an activity number for the permit that is to be modified.

If the facility does not have an ID, complete and return the form **AIMS - 099** "Facility ID and Pin Code Assignment for RADIUS Submittal" located in Appendix A. The AIMS – 099 form may be copied or you may call the Department at (609) 292-6716 to obtain a copy if needed. The AIMS – 099 form must be returned to the Department and the facility assigned an ID Number before an application can be submitted .

The following forms constitute the permit application. Each form is briefly described here; detailed instructions on how to complete these forms are provided in the manual.

Completing Permit Application Forms

- **Permit Modifications Cover Page**—used to record the general description of modifications you are submitting for an existing permit or a permit application currently under review.
- **Facility Profile (General)**—used to record contact and summary information about the permit application.
- **Facility Profile (Permitting)**—used to record facility-related information required specifically by the Air Quality Permitting Program.
- **Non-Source Fugitive Emissions**—used to record the description and, estimated potential-to-emit, of each non-source activity causing fugitive emissions at the facility.
- **Insignificant Source Emissions**—used to record the description and, estimated potential-to-emit, of each insignificant source or source group causing emissions at the facility.
- **Equipment Inventory**—used to record data for each piece of equipment or operation at the facility.
- **Control Device Inventory**—used to record data for each control device at the facility.
- **Emission Point Inventory**—used to record data for each emission point at the facility.
- **Emission Unit/Batch Process Inventory**—used to record information about emission units, emission unit operating scenarios, batch processes, batch process operating scenarios, and batch process steps. **Pilot Plant operations permitted under the Pilot Plant Permit Procedure utilize the batch process forms.**
- **Subject Item Group Inventory**—used to group subject items (e.g., emission units) together for the purpose of proposing a cap, an intra-facility emissions trading group, or placing requirements on groups of subject items.
- **Potential to Emit**—used to record the potential emissions and summary information concerning each emission unit and operating scenario, batch process, batch process operating scenario, and/or batch process step at the facility.
- **Compliance Plan**—used to record the compliance plan and requirements you are proposing for the facility; the window supporting this form provides access to a series of requirements-related windows for developing proposed requirements.

Key Definitions for Emission Unit Application

Term	Definition
Emission Unit	An emission unit is a permitting method that describes one or more significant

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Term	Definition
	component operations. Stand-alone pieces of equipment will make up an emission unit. Pieces of equipment with physical commonalities (such as common exhaust systems) making collective data presentation easier to understand also may constitute an emission unit. An emission unit process is more likely to be a continuous operation, where raw materials enter production equipment as product is removed from it. A piece of equipment may only appear in one emission unit. If a piece of equipment operates in more than one mode of operation, you should describe the various modes of operation as operating scenarios within one emission unit. Describe emission units using AIMS-001K, and AIMS-001L.
Operating Scenario	An operating scenario describes a particular manufacturing operation or process. The description identifies the relationship of a piece of equipment, a control device(s) (optional), and an emission point(s). An operating scenario may describe only one piece of equipment.

Key Definitions for Batch Process Application

Term	Definition
Batch Process	A batch process is a method of permitting that describes manufacturing operations (normally related to the chemical or pharmaceutical industries) that involve multiple components and multiple manufacturing operations. Continuity of the flow of raw materials into and the flow of products from production equipment primarily differentiates an emission unit process from a batch process. Batch processes occur when raw material input and product removal do not occur simultaneously. Describe batch processes using AIMS-001M, AIMS-001N, and AIMS-001O.
Operating Scenario	An operating scenario in a batch process always describes a process line. We refer to the unit operations within the process line as steps. Therefore, naming the operating scenario within a batch process and the step identifies a unit operation.

Completing the Permit Cover Page, AIMS-001A

The Permit Cover Page, **AIMS-001A**, contains the application category, the designation of the permit application, the facility ID and name, and a general description of modifications that the applicant is proposing to an existing permit, or to an application that is currently undergoing review. The applicant therefore uses the same form to submit an application for a new permit, or a revision to a recently submitted application. If a modification of a permit/certificate is being submitted, you will need the activity number of the permit that is to

To complete the Permit Cover Page form, do the following:

- When you submit the application to NJDEP, this number will be used to associate the modification with the specified permit.

- ### Completing the Facility Profile (General) Forms, AIMS-001B & AIMS-001C

To complete the Facility Profile (General) forms, do the following:

Page 4• 5/98

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- **Location and Industry Information**—Enables you to enter the street address, geographic coordinates, and Standard Industrial Classification (SIC) codes for the facilities.
- **Contact Information**—Enables you to enter contact information for each type of contact associated with the facility.

1. **Fill out the Location and Industry Information form (AIMS-001B).**

Facility (ID)	Enter the facility name and the New Jersey Air Permit Facility ID number, from previous permitting activities. The correct facility ID number must be entered for the permit to be processed. If the facility does not have an ID, complete and return the form AIMS - 099 “Facility ID Code Assignment ” located in Appendix A. The AIMS – 099 form may be copied or you may call the Department at (609) 292-6716 to obtain a copy if needed. The AIMS – 099 form must be returned to the Department and the facility assigned an ID before an application can be submitted .
Street Address	Enter the street address of the facility’s Physical Location, not its mailing address.
Mailing Address	Enter the street address or P.O. Box where the facility receives mail
County Location	Enter the facility’s county location, not its mailing address county.
Location Description	Describe the facility’s location if it is difficult to find using the street address.
State Plane Coordinates	Enter the facility’s state plane coordinates for the center point of the facility. These fields [are optional, but they do] help the department’s geographic information system (GIS) understand more about the state’s environment.
The State Plane Coordinate	(SPC) system is a geographic reference system in the horizontal plane describing the position of points or features with respect to other points in New Jersey. The official survey base of the state is known as the New Jersey State Plane Coordinate System and is usually referenced in either feet or meters.
Coordinate Units	Choose one of the following unit types from the drop down list: Dec. Deg., Dec. Min., DMS, Feet, Long./Lat., Meters, and other. SPC are almost always referenced in either feet or meters. For this reason, the Department prefers the units to be either Feet or Meters.
Datum	The official survey base of the state is known as the New Jersey State Plane Coordinate System whose geodetic positions have been adjusted on the North American Datum of 1983 (NAD83) as per Chapter 218, Laws of New Jersey 1989. Choose the Datum (reference point), that the State Plane Coordinates entered above are based on, from the drop-down list. Choose either NAD27, NAD83 , or Other. (Note: The previous Datum was NAD27 and some coordinates may still be expressed in the old datum). If you have any questions regarding State Plane Coordinates please contact the GIS Hotline at (609) 777-0672.
Source Origin	Choose the source of the state plane coordinates from the drop-down list. Choose one of the following: County, DEP-GIS, DEP Program, EPA, other/unknown, or submittal document. (Note: <i>Source Origin</i> refers to the agency or company that supplied the coordinates).

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Source Type Choose the type of the source for the state plane coordinates from the drop-down list. Choose one of the following: Address match, DEP program database, digital image, GPS, hard copy map, or other/unknown. (Note: *Source Type* refers to the method from which the coordinates were derived)

Primary SIC Enter the facility's primary Standard Industrial Classification (SIC) code as determined by the New Jersey Secretary of State. The SIC code is registered with the U.S. Department of labor, call (609) 272-2633.

Secondary SIC Enter the facility's secondary SIC (if any).

Initial Op. Permit Application - Facility Profile [General] - BOP970003

Facility ID: 10040 Facility Name: Acme Co.

Location and Industry Information Contact Information

Contact Type: Owner (Current Primary)

Name: Organization: Title: Org. Type: Phone: () - x NJ EIN: Fax: () - x Mailing Address: Other: () - x Type: Email: Copy To Clear Contact

2. Fill out the Contact Information on the form AIMS-001C for all appropriate contact types.

Contact Type(s) Select the appropriate contact type(s) from the list on the bottom of the form. A person may be more than one type of contact.

Name Enter the contact's name.

Title Enter the contact's job title.

Phone Enter the contact's telephone number.

Fax Enter the contact's telefax number (optional).

Other Enter another telephone for the contact.

Type Enter the type of "other" number if a number was entered in the "other" field. Choose the type from one of the following: FAX; Mobile; Modem; pager, or Toll free.

E-mail Enter the contact's electronic mail address (optional).

Organization Enter the contact's organization. This is important for contacts not associated with the facility.

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- Organization Type** Choose the appropriate type of organization from one of the following: Federal; Local; Private; Public; State, or Utility.
- NJ EIN** Enter the contact's eleven digit Employer Identification Number (optional). This information can be found on the facility's tax records.
- Mailing Address** Enter the contact's mailing address.

Completing the Facility Profile (Permitting) Form, AIMS-001D

The Facility Profile (Permitting) form, **AIMS-001D**, contains facility-related information specifically required by the Air Quality Permitting Program.

To complete the Facility Profile (Permitting) form, do the following:

Initial Op. Permit Application - Facility Profile (Permitting) - BOP970001

Facility: AQ67675 Bergman's Cleaners

1. Is this facility classified as a small business by the USEPA?
2. Does this facility exceed one or more applicability levels?
3. Are you voluntarily subjecting this facility to the requirements of Subchapter 22?
4. Has a copy of this application been sent to the USEPA?
5. If not, has the EPA waived the requirement?
6. Are you claiming any portion of this application to be confidential?
7. Have you provided, or are you planning to provide air contaminant modeling?

Air Contaminant(s)	
Name	CAS Number
Methyl acetate	00079-20-9
Aniline	00062-53-3
Ethyl alcohol	00064-17-5
#6 Fuel oil	68476-33-5
Cresol (-o)	00095-48-7

1. Respond to each question by checking Yes or No in the boxes adjacent to the list for each question below:

Question 1. Is this facility classified as a small business by the EPA?

Note: Yes can be entered if the facility can meets all of the following criteria for being classified as a small business:

1. It is owned or operated by a person that employs 100 or fewer people;
2. It meets the small business definition in the federal Small Business Act (15 U.S.C. §631 et seq.);
3. It is not a major facility;
4. It emits less than 50 tons per year of any regulated air contaminant; and
5. It emits less than 75 tons per year of all regulated air contaminants.

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The Small Business Assistance Program provides assistance and can be reached at: (609) 292-5565.

Complete the major facility applicability worksheet contained in the “Operating Permits Guidance Document, Part I” found in Appendix G. If the answer is yes to any item, select yes here.

Select yes if the facility does not have to submit an operating permit but wants an operating permit anyway.

For Operating Permit applications, a copy of the operating permit application must be sent to the U. S. Environmental Protection Agency (Region II). Once the NJDEP has deemed the application administratively complete, the Department will notify the facility what parts of the application have to be sent to the USEPA.

Question 5. If not, has the EPA waived the requirement?

Question 6. Are you claiming any portion of this application to be confidential?

Question 7. Have you provided, or are you planning to provide air contaminant modeling?

Note: If you respond “Yes” to question No. 7, fill out the Air Contaminants Table, **AIMS-001D**. If more space is required **AIMS-001E** can be used as a supplement, otherwise do not complete **AIMS-001E**.

- Page 8• 5/98

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To complete the Non-Source Fugitive Emissions form, do the following:

[illegible]

FG NJID	Provide a unique numeric identification for each activity that produces non-source fugitive emissions. The numeric portion of the ID can be six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: FG1.
Description of Activity	Describe the cause of the non-source fugitive emission (e.g. leaking valves and flanges on pipes or dust from the coal piles). The maximum size for the facility's description of the cause for the non-source fugitive emission is 150 characters.
Location	Describe the location of the insignificant source/source type within the facility (e.g. Production building 1).
Estimate of Emissions	Enter an estimate of the actual emissions in tons per year for each activity causing non-source fugitive emissions.

Key Definitions for Batch Process Application • 9

This section is not required for pre-construction permit applications regulated under N.J.A.C. 7:27-8. The Insignificant Source Emissions form, **AIMS-001G**, contains the description and—optionally—the estimated potential-to-emit of each insignificant source or source group at a facility. Total emissions are also stated here, and are required for each applicable pollutant category. These totals are entered manually. See N.J.A.C. 7:27-22.1 for the definition of Insignificant Source.

May 30th Permit App - Insignificant Source Emissions

Facility:

IS NJID	Source/Source Group Description	Equipment Type

Calculate Totals

IS NJID Provide a unique numeric identification for each source or group of sources considered insignificant. The numeric portion of the ID can be six digits. For the ID enter a number and number it sequentially An example of the full alphanumeric ID is: IS1.

Source/Group Description Describe the source or group of sources considered insignificant, including size (e.g. 2,000 gallon HCl storage tank). Similar insignificant sources may be grouped together, however the groups may not be grouped together.

Location Describe the location of the insignificant source/source type within the facility (e.g. Production building 1).

Page 10• 5/98

Columns exist for the following pollutants: VOC (Total), NOx, CO, SO2, TSP, PM-10, Pb, HAPs (Total), and Other (Total).

Completing the Equipment Inventory, AIMS-001H

The Equipment Inventory form, **AIMS-001H**, contains data for each piece of significant equipment or operation at the facility. The window enables you to enter additional details for the equipment you are specifying, if appropriate. Both Operating Permit applications and Pre-Construction Permit applications use this window.

To complete the Equipment Inventory, do the following:

Equip. NJID	Facility's Designation	Equip. Description
E1	A-1	Enter descriptive text here.
E2	A-2	Enter descriptive text here.

1. Complete the information in the form, AIMS-100H.

E NJID Provide a unique numeric identification for each piece of significant equipment. The numeric portion of the ID can be six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: E1

Note: If a permit modification involves an existing significant piece of equipment, enter the ID number of the affected piece of equipment.

Facility's Designation Enter the facility's unique designation for the significant piece of equipment (e.g. R-6 Reactor). Since the facility may have several significant pieces of equipment, this field can help the facility keep track of individual pieces of equipment. The maximum size for the facility's designation of the equipment is twelve characters.

Equipment Description Enter the general name used to identify each significant piece of equipment (e.g. 20,000 gallon Fuel oil tank no. 29, east yard). Do not list control devices or instrumentation used to control the manufacturing operations.

Equipment Type Enter an equipment type from one of the following choices listed below for the significant piece of equipment. If the significant equipment type is not among the choices, choose "Other Equipment". All equipment types listed below have an AIMS-E series Equipment Inventory Information form.

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Equipment Types and Form Title

AIMS-E-001	AIR STRIPPER
AIMS-E-002	ASPHALT MANUFACTURING DRYER
AIMS-E-003	BAKERY OVEN
AIMS-E-004	BOILER
AIMS-E-005	COMBUSTION TURBINE
AIMS-E-006	DEGREASER (CONVEYORIZED: HEATED (CH))
AIMS-E-007	DEGREASER (CONVEYORIZED: UNHEATED (CU))
AIMS-E-008	DEGREASER (CONVEYORIZED: VAPOR OR SUPER-HEATED
VAPOR (CV))	
AIMS-E-009	DEGREASER (OPEN TOP: HEATED (OTH))
AIMS-E-010	DEGREASER (OPEN TOP: UNHEATED (OTU))
AIMS-E-011	DEGREASER (OPEN TOP: VAPOR OR SUPER HEATED VAPOR
(OTV))	
AIMS-E-012	DUCT BURNER
AIMS-E-013	DRY CLEANING EQUIPMENT
AIMS-E-014	SURFACE COATING DRYER
AIMS-E-015	EMERGENCY GENERATOR
AIMS-E-016	FUEL COMBUSTION (OTHER EQUIPMENT)
AIMS-E-017	GLASS MANUFACTURING FURNACE
AIMS-E-018	INCINERATOR
AIMS-E-019	MANUFACUTIRNG AND MATERIALS HANDLING EQUIPMENT
AIMS-E-020	MUNICIPAL SOLID WASTE LANDFILL
AIMS-E-021	OTHER EQUIPMENT
AIMS-E-022	PRINTING PRESS (GRAPHIC ARTS)
AIMS-E-023	PRINTING PRESS (NEWSPAPER)
AIMS-E-024	PROCESS HEATER
AIMS-E-025	SOIL VENTING EQUIPMENT
AIMS-E-026	SOILD VAPOR EXTRACTION EQUIPMENT – PILOT TEST
AIMS-E-027	STATIONARY INTERNAL COMBUSTION ENGINE
AIMS-E-028	STERILIZER
AIMS-E-029	STORAGE VESSEL
AIMS-E-030	SURFACE COATING (FABRIC MATERIAL)
AIMS-E-031	SURFACE COATING (NON-FABRIC MATERIAL)

Permit Certificate Number Enter the equipment's air pollution control permit/ certificate number or the log number of pending applications (e.g. "123456", "01970001", etc.). If the equipment is not permitted and was installed before 1968, indicate this by entering P1968. If the equipment does not have a permit and is not grandfathered, no matter what the reason, leave this field blank.

Page 12 • 5/98

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Enter the date in MM/DD/YY format.

Grandfathered Equipment? If the significant piece of equipment is grandfathered, enter yes, otherwise, enter no. Review N.J.A.C. 7:27-8 for information about grandfathered equipment. Remember to leave the permit certificate number blank if the equipment is grandfathered.

Last Modification Date If the significant piece of equipment was modified after 1968 to the extent that the facility had to apply for a permit/certificate change under provisions of Subchapter 8, show the most recent date here.

Enter a date in MM/DD/YY format that is later than January 1, 1968.

ES NJID Equipment Set ID numbers are for equipment **used in batch processes only (and pilot plant operations permitted under the Pilot Plant Permit Procedure, see Batch Process Inventory)**. If the facility uses several pieces of equipment in a batch step and they are interchangeable, they may be treated as a set. To do this, create an ID number for each set. Any piece of equipment may be in more than one equipment set.

Provide a unique numeric identification for each equipment set. The numeric portion of the ID can be six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: ES1.

Note: The “ES preface is on the forms.

Completing the Control Device Inventory, AIMS-001I

The Control Device Inventory form , **AIMS-001I**, contains data for each control device at the facility. The window enables you to enter additional details for the control devices you are specifying, if appropriate. This window is used for both Operating Permit applications and Pre-Construction permit applications. To complete the Control Device Inventory, do the following:

CD NJID	Facility's Designation	CD Description
CD66	FF-101	Place descriptive text here.
CD67	FF-42	Place descriptive text here.
CD68	FZ-56-01-2	Place descriptive text here.
CD69	FE-022	Place descriptive text here.

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1. Fill out the form information, AIMS-001I.

CD NJID Provide a unique numeric identification for each control device. The numeric portion of the ID can be six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: CD1.

Note: The “CD” preface is on the forms.

Facility’s Designation Enter the facility’s unique designation for the control device (e.g. SCR-1). Since the facility may have many control devices this field can help the facility keep track of individual control devices. The maximum size for the facility’s designation of the control device is twelve characters.

CD Description Enter the general name used to identify each control device (e.g. Loading Dock Baghouse no. 1, east wing). The maximum size for the facility’s description of the control device is 150 characters

Control Device Type Enter a control device type from one of the following control devices. If the control device type is not among the choices, choose “Other”, and complete the “Other” control device inventory information form, AIMS-CD-008.

<u>Form</u>	<u>Control Device and Form Title</u>
AIMS-CD-001	ALL CONTROLS
AIMS-CD-002	ADSORBER
AIMS-CD-003	BIOFILTER
AIMS-CD-004	CONDENSER
AIMS-CD-005	CYCLONE
AIMS-CD-006	ELECTROSTATIC PRECIPITATOR
AIMS-CD-007	FLARE
AIMS-CD-008	OTHER
AIMS-CD-009	OXIDIZER (CATALYTIC)
AIMS-CD-010	OXIDIZER (THERMAL)
AIMS-CD-011	PARTICULATE FILTER (BAGHOUSE)
AIMS-CD-012	PARTICULATE FILTER (CARTRIDGE)
AIMS-CD-013	PARTICULATE FILTER (HEPA)
AIMS-CD-014	PARTICULATE FILTER (OTHER)
AIMS-CD-015	SCRUBBER (MULTI-STAGE)
AIMS-CD-016	SCRUBBER (OTHER)
AIMS-CD-017	SCRUBBER (PACKED TOWER)
AIMS-CD-018	SCRUBBER (VENTURI)
AIMS-CD-019	SELECTIVE CATALYTIC REDUCTION
AIMS-CD-020	SELECTIVE NON-CATALYTIC REDUCTION

Note: For certain values, you can enter additional details through the use of the Control Device Inventory Information forms.

Installation Date If the control device does not have a permit certificate associated with it and was installed on or after 1968, enter the date the control device was installed.

Enter a date in MM/DD/YY format.

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Grandfathered CD ? **Leave blank**

Last Modification Date If the control device was modified after 1968 to the extent that the facility had to apply for a permit/certificate change under provisions of Subchapter 8 or Subchapter 22, show the most recent date here.

Enter a date in MM/DD/YY format that is later than January 1, 1968.

CS NJID Set ID numbers are for control devices **used in batch processes only (and pilot plant operations permitted under the Pilot Plant Permit Procedure, see Batch Process Inventory)**. If the facility uses several control devices in a batch step and they are interchangeable, they may be treated as a set. To do this, create an ID number for each set.

However, only similar control devices with similar design criteria may part of a set. A set may include only certain size condensers, for example, but not condensers and carbon adsorption drums.

Provide a unique numeric identification for each control device set. The numeric portion of the ID can be six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: CS1.

The screenshot shows a software window titled "Edit Details...". On the left, a "Windows:" pane lists "Biofilter". The main area, titled "Details for: Biofilter", contains the following fields:

- Make: [text box]
- Manufacturer: [text box]
- Model: [text box]
- Maximum Air Flow Rate to Biofilter (acfm): [text box]
- Maximum Temperature of Vapor Stream to Biofilter (deg F): [text box]
- Minimum Temperature of Vapor Stream to Biofilter (deg F): [text box]
- Minimum Moisture Content of Vapor Stream to Biofilter (%v): [text box]

At the bottom of the dialog are buttons for "OK", "Cancel", "Add", "Insert", and "Delete".

The above example is for the “Biofilter” control device type.

Completing the Emission Point Inventory, AIMS-001J

The Emission Point Inventory form , **AIMS-001J**, contains data for each emission point at the facility. An emission point is the location where you physically release emissions into the atmosphere. An emission point can be a stack, a wall vent, the general building ventilation exhaust, or a window. This form is used for both Operating Permit and certain Pre-Construction Permit applications.

To complete the Emission Point Inventory, do the following:

Initial Op. Permit Application - Emission Point Inventory - BOP970001

Facility: 10040 Documentation4

PT NJID	Facility's Designation	PT Description
PT1	Q-9	Enter descriptive text here.
PT2	Q-87006	Enter descriptive text here.

Equivalent Diameter:

Length: in. or Area: in.²

and Width: in.

1. Fill out the information in the form, AIMS-001J.

Note: The information on this form is optional for storage tanks.

PT NJID

Provide a unique numeric identification for each emission point. The maximum length of the numeric portion of the ID is six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: PT1.

Note: The "PT" preface to the number is on the forms.

Facility's Designation

Enter the facility's unique designation for the emission point (e.g. Hop-001). Since the facility may have many emission points this field can help the facility keep track of individual emission points. The maximum size for the facility's designation of the emission point is twelve characters.

PT Description

Enter the general name used to identify each emission point (e.g. boiler stack no. 1, east wing).

Configuration

Choose one of the six emission point configurations/shapes from the drop down list box. The shape choices of the emission points are: rectangle; round; and square. The configuration choices are: door; surface; and window.

Equivalent Diameter

Enter the emission point's diameter in inches. If the emission point is not round, show the equivalent diameter.

Height

Enter the height above ground, in feet. The height above ground (stack height) is the distance from ground level to the emission point's exit point.

Distance to Property Line

Enter the emission point's distance to the nearest property line, in linear feet.

Exhaust Temperature

Enter the emission point's minimum, maximum, and average exhaust temperature in degrees F. Describe only steady-state conditions.

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Exhaust Volumetric Flow Enter the emission point's minimum, maximum, and average exhaust volumetric flow rate in actual cube feet per minute. Describe only steady-state conditions.

Discharge Direction Enter the emission point discharge direction from one of the following choices:

PS NJID Set ID numbers are for emission points **used in batch processes only (and pilot plant operations permitted under the Pilot Plant Permit Procedure, see Batch Process Inventory)**. If the facility uses several emission points in a batch step and they are interchangeable, they may be treated as a set. Any emission point may belong to more than one set. To do this, create an ID number for each set

Provide a unique numeric identification for each emission point set. The numeric portion of the ID can have a maximum of six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: PS1.

Completing the Emission Unit/Batch Process Inventory

The Emission Unit/Batch Process (EU/BP) Inventory forms contain information about emission units, emission unit operating scenarios, batch processes, batch process operating scenarios, and batch process steps. The forms are also used to link equipment, control devices, and emission points.

- **Emission Unit :** The form contains two parts: Emission Unit Inventory (default) and Emission Unit Operating Scenarios. Typically, source operations that have continuous operations such as storage tanks, boilers should use this application format.
- **Batch Process :** The form contains three parts: Batch Process Inventory (default), BP Operating Scenarios, and BPOS Steps. Typically, source operations such as chemical batch reactors will use this type of application format.

Completing the Emission Unit Inventory, AIMS-001K

To define the emission unit inventory use form **AIMS-001K**. For each emission unit, you can create one or more emission unit operating scenarios on the Emission Unit Operating Scenarios form, **AIMS-001L**. .

To create or edit the emission unit inventory, do the following:

U NJID	Facility's Designation	U Description
U2	ABCDEF	This is a description of this emission unit of up to 150 characters.

1. Enter information on the Emission Unit Inventory Form, AIMS-001K, as follows:

U NJID

Provide a unique numeric identification for each emission unit. The maximum length of the numeric portion of the ID is six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: U1.

Note: The “BP” preface is on the forms.

Facility's Designation

(Optional) Enter the facility's unique designation for the emission unit (e.g. Boiler 1). Since the facility may have several emission units this field can help the facility keep track of individual emission units. The maximum size for the facility's designation of the emission unit device is twelve characters. The facility's designation will appear in the Potential to Emit form when selecting an emission unit or batch process to apply the emission limits to.

EU Description

Enter the general name used to identify each emission unit (e.g. Steam production boiler no. 1, east wing).

Completing Emission Unit Operating Scenarios, AIMS-001L

After defining the emission units on the Emission Unit Inventory, you can create one or more emission unit operating scenarios for each emission unit, on the Emission Unit Operating Scenarios form, **AIMS-001L**. To create or edit emission unit operating scenarios, do the following:

1. Select the emission unit for which you want to define operating scenario(s) .

2. Enter the emission unit operating scenario information on form, AIMS-0011.

UOS NJID

Provide a unique numeric identification for each emission unit operating scenario. The maximum length of the numeric portion of the ID is six digits. For the ID enter a number and number it sequentially. An example of the full alphanumeric ID is: OS1.

Note: The "OS" designation is on the forms.

Facility's Designation

(Optional) Enter the facility's unique designation for the emission unit operating scenario (e.g. Boil 1, No.2). Since the facility may have several emission units operating scenarios this field can help the facility keep track of individual operating scenarios. The maximum size for the facility's designation of the operating scenario is twelve characters.

EU Description

Enter the general name used to identify each emission unit operating scenario (e.g. Steam production boiler no. 1, using No. 2 Fuel, east wing).

Operation Type

Enter one of the six operation types from one of the following choices: Maintenance, Malfunction, Normal-Steady State, Shutdown, Standby, and Startup. The normal operation choice is Normal-Steady State.

Significant Equipment

Enter the piece of significant equipment NJID, defined on the Equipment Inventory form, associated with the operating scenario. Only one piece of equipment may be included in an operating scenario. A piece of equipment may be used in more than one operating scenario.

Information such as the fuel type burned in a boiler is captured at the operating scenario level. Operating parameters of the equipment can vary from one operating scenario to another. To indicate the boiler burns No. 2 fuel while operating under operating scenario

Control Device NJID

Enter the control device(s) NJID(s), defined on the Control Device Inventory form, associated with the operating scenario. Multiple control devices can be

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used in an operating scenario. A control device may be used in more than one operating scenario.

Enter the control device’s role (primary, secondary, or tertiary) in the operating scenario.

Information such as the scrubbing medium used in the control device is captured at the operating scenario level. Operating parameters of the control device can vary from one operating scenario to another.

SCC(s) **(optional)** Enter the SCC (Source Classification Code) number(s), that best describes the operating scenario.

Emission Point(s) Enter the emission point NJID number(s), defined on the Emission Point Inventory form, associated with the operating scenario. Multiple emission points may be utilized in an operating scenario. An emission point may be used in more than one operating scenario.

Annual Operating Hours Enter the minimum and maximum hours of operation for the operating scenario. Running 24 hours per day, every day of the year, an operating scenario cannot exceed 8760 hours per year. Disregard leap years.

VOC Range If the piece of equipment associated with the operating scenario is an applicable source operation listed in N.J.A.C. 7:27-16.16(a), enter the range (from Table 16A in N.J.A.C. 7:27-16.17(d)) of this operating scenario’s VOC emissions. Refer to N.J.A.C. 7:27-16.16(d) for the procedure on calculating the VOC Range.

Min. Flow (acfm) Enter the minimum flow rate from the operating scenario in actual cubic feet per minute.

Max. Flow (acfm) Enter the maximum flow rate from the operating scenario in actual cubic feet per minute. The maximum possible field size of the flow rate is 8,1 (9,999,999.9 ACFM).

Min. Temp. (deg. F) Enter the minimum emission point temperature from the operating scenario in degrees Fahrenheit.

Max. Temp. (deg. F) Enter the maximum emission point temperature from the operating scenario in degrees Fahrenheit. The largest possible temperature field size allowed is 5,1 (9,999.9 degrees Fahrenheit).

Note: For each emission unit operating scenario you need to define repeat this step

Completing the Batch Process Inventory, AIMS-001M

To define the batch process inventory use BP Inventory form, **AIMS-001M**. On this form, provide information for each batch process you need to define. Then, for each batch process, you can create one or more batch process operating scenarios on the BP Operating Scenarios, use form **AIMS-001N** for data entry. Finally, for each batch process operating scenario, you can create one or more batch process operating scenario steps, on the BPOS Step form, **AIMS-001O**.

To create or edit the batch process inventory, do the following:

Initial Op. Permit Application - Emission Unit/Batch Process Inventory - BOP970008

Facility: 10040 Documentation4 Type: ☐ U ☒ BP

BP NJID	Facility's Designation	BP Description
BP121212	123123123123	Easy as 123
BP121213	123321123321	Easy as 456
BP121214	231313	Easy as 789
BP121215		

1. Enter information on the Batch Process Inventory form, AIMS-001M, as follows:

BP NJID Provide a unique numeric identification for each batch process. The maximum length of the numeric portion of the ID is six digits. For the ID, enter a number and number it sequentially. An example of the full alphanumeric ID is: BP1.

Note: The “BP” preface is on the forms.

Facility's Designation Enter the facility's unique designation for the batch process (e.g. Lube Stocks). The batch process may be specific as a particular product (e.g. Quinine) if only one product is produced in the equipment, a product line or family of similar products (e.g. Analgesics), or a logical grouping of equipment (e.g. Building R3). Since the facility may have several batch processes, this field can help the facility keep track of individual batch processes.

BP Description Enter the general name used to identify each batch process (e.g. Analgesic Creams Production, east wing).

Note: A Raw Material & Air Contaminant List must be attached to the application (preferably in Microsoft Word format) for each Batch Process included in the application. The raw materials/air contaminants must be organized in the following categories: VOC (Total), NOx (Total), CO, SO2, TSP, PM-10(Total), Pb, and HAPs (Total). Raw materials/air contaminants that do not fit into one of the above categories (e.g.: Ammonia) should be placed into the Other (Total) category. HAP raw materials/air contaminants may belong to a category in addition to HAPs (Total) (e.g.: Benzene is a HAP as well as a VOC (Total)).

Pilot Plant Operations

Research and Development operations in pilot plants have an option to permit the equipment under the New Jersey Department of Environmental Protection's Pilot Plant Permit Procedure. The procedure includes additional operational flexibility provisions for R&D facilities by allowing the facility to move equipment within the pilot plant to perform experiments without the need to apply to the Department for permit modifications. Pilot plants not associated with an operating permit subject to N.J.A.C. 7:27-22 should complete the following forms:

- 1. Facility Profile (General) (AIMS-001B, and C)** - Complete the forms since the pilot plant is submitted as a stand alone permit application.
- 2. Facility Profile (Permitting) (AIMS-001D, and E)** - Complete the forms since the pilot plant is submitted as a stand alone permit application.
- 3. Equipment Inventory (AIMS-001H)** – Include all the equipment used in the pilot plant. Create an equipment set consisting of all the De Minimis equipment in the pilot plant (refer to the Pilot Plant Permit Procedure for the definition of De Minimis). Use of significant equipment not included in this inventory may not occur until an approved permit revision is obtained to include the additional equipment.
- 4. Control Device Inventory (AIMS-001I)** – Include all the control devices used in the pilot plant. Create a control device set consisting of all the control devices used in the pilot plant.
- 5. Emission Point Inventory (AIMS-001J)** – Include all the emission points used in the pilot plant. Create an emission point set consisting of all the emission points used in the pilot plant.
- 6. Batch Process Inventory (AIMS-001M, N, and O)** – Create a “batch process” and a “batch process operating scenario” for the pilot plant operations. Create a Raw Materials & Air Contaminant List for the pilot plant following the procedure listed above. Create a “batch process operating scenario step” for all the De Minimis equipment in the pilot plant. Utilize the equipment, control device and emission point sets created on the Inventory form for the De Minimis BPOS Step. For each Non-De Minimis piece of equipment, create a separate BPOS Step and include the control device(s) and emission point(s) used with the Non-De Minimis piece of equipment.
- 7. Potential to Emit (AIMS-001Q, and R)** – Insert the annual emissions, for each air contaminant category and individual HAP, for the pilot plant by completing the Potential to Emit form for the operating scenario summary (OS0). For each Non-De Minimis BPOS Step created, indicate the worst case hourly emission rate (maximum number of pounds emitted in any one consecutive 60 minute period) for each air contaminant class and individual HAP. Batch cycle average emission rates are allowed for VOC (Total) only.
- 8. Compliance Plan (AIMS-001S)** – Complete the compliance plan for the facility, “batch process”, “batch process operating scenario”, and “batch process operating scenario step”.

After defining batch processes on the Batch Process Inventory form, **AIMS-001M**, you can create one or more batch process operating scenarios on for each batch process on the BP Operating Scenarios.

1. Enter information on the BP Operating Scenario form, AIMS-001N, as follows:

BPOS NJID

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portion of the ID is six digits. For the ID, enter a number and number it sequentially. An example of the full alphanumeric ID is: OS1.

Note: The “OS ” preface is on the forms.

Facility’s Designation	(optional) Enter the facility’s unique designation for the batch process operating scenario (e.g. Acid Blue 7). A batch process operating scenario describes a process line involving several unit operations (steps) that several pieces of equipment perform in manufacturing a particular product (or family of products). Since the facility may have several batch process operating scenarios for each batch process, this field can help the facility keep track of individual batch process operating scenarios. The maximum size for the facility’s designation of the batch process operating scenario is twelve characters.
BPOS Description	Enter the general name used to identify each batch process operating scenario (e.g. Acid Red No. 7 Dye, Area 7, east wing).
BPOS Type	Enter one of the following seven types of operation for the batch process operating scenario: Batch Manufacturing, Maintenance, Malfunction, Normal-Steady State, Shutdown, Standby, and Startup.

Completing Batch Process Operating Scenario Steps, AIMS-001O

After defining batch process operating scenarios on the BP Operating Scenarios form, **AIMS-001N**, you can create one or more batch process operating scenario steps for each scenario using the BPOS Steps form, **AIMS-001O**.

To create or edit batch process operating scenario steps, do the following:

1. Enter information on the BPOS Steps form, AIMS-001O, as follows:

Step NJID	Provide a unique numeric identification for each batch process operating scenario step associated with the batch process operating scenario. The maximum length of the numeric portion of the ID is six digits. For the ID, enter a number and number it sequentially. An example of the full alphanumeric ID is: ST1.
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Note: The “ST” preface is on the forms..

Facility’s Designation	(optional) Enter the facility’s unique designation for the step in the batch process operating scenario (e.g. Filling, or Charge K7). Since the facility may have several steps in the batch process operating scenarios, this field can help the facility keep track of individual steps in a batch process operating scenario. The maximum size for the facility’s designation of the step for a batch process operating scenario is twelve characters.
Step Description	Enter the general name used to identify each step in the batch process operating scenario (e.g. Charge kettle 7 with solvent from tank 55). The description should clearly identify the operation occurring during the step.

Operation Type	Enter one of the following six types of operation for the step in the batch process operating scenario: Maintenance, Malfunction, Normal-Steady State, Shutdown, Standby, and Startup.
Significant Equipment	Enter the piece of equipment or equipment set associated with the step in the BPOS (e.g. E1, or ES1). The equipment choices are drawn from the information entered in the Equipment Inventory form. A single piece of equipment may be utilized in a step or a group of equipment may be organized into an equipment set (refer to the Equipment Inventory form for details).
Control Device(s)	<p>Enter the control device, control devices, or control device set associated with the step in the BPOS (e.g. CD1, or CS1). The control device choices are drawn from the information entered on the Control Device Inventory form. A single control device may be utilized in a step, several control devices may be utilized (Principal, Secondary, etc.), or a group of control devices may be organized into a control device set (refer to the Control Device Inventory screen for details).</p> <p>Enter the control device's role (primary, secondary, or tertiary) in the step.</p> <p>Information such as the scrubbing medium used in the control device is captured at the BPOS step level. Operating parameters of the control device can vary from one step to another. To indicate Scrubber X requires scrubbing medium Y while operating during step T, complete the appropriate control device OS/BPOS Step Information form.</p>
	Enter values for the Control Device NJID and P/S/T (primary, secondary, and tertiary).
Emission Point(s)	Enter the emission point NJID number(s) (e.g. PT1, PS1), defined on the Emission Point Inventory form, associated with the BPOS step. Multiple emission points may be utilized in an BPOS step. An emission point may be used in more than one operating scenario.
	Enter a value for the Emission Point NJID.
SCC(s)	(optional) Enter the SCC (Source Classification Code) number(s), that best describes the operating scenario.
Step Run Time (hours)	<p>Enter the minimum and maximum time, in hours, that is required to perform the BPOS step. Show fractions as decimals to the tenth of an hour (e.g. 15.3).</p> <p>The Step Run Times (Min., Max.) entered into the fields will be used to determine the Batch Process Operating Scenario Run Time (BPOSRT). The BPOSRT is the addition of all step times within the BPOS (i.e. the time required to produce a batch). Each time a step is added to the BPOS, the step time for that step should be added to the current BPOSRT values (Min, Max.). If the actual BPOSRT is not the addition of all the step times (i.e. some steps are performed concurrently), another value may be entered in the BPOSRT (calculated) fields. The BPOSRT (calculated) values may not exceed the addition of all BPOS step times.</p>
VOC Range	If the piece of equipment associated with the step is an applicable source operation listed in N.J.A.C. 7:27-16.16(a), enter the range (from Table 16A in N.J.A.C. 7:27-16.17(d))

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of this step’s VOC emissions. Consult N.J.A.C. 7:27-16.16(d) for calculating the VOC Range.

Min. Flow (acfm)	Enter the minimum flow rate from the operating scenario in actual cubic feet per minute.
Max. Flow (acfm)	Enter the maximum flow rate from the operating scenario in actual cubic feet per minute. The maximum possible size of the flow rate is 9,999.9 ACFM.
Min. Temp. (deg. F)	Enter the minimum emission point temperature from the operating scenario in degrees Fahrenheit.
Max. Temp. (deg. F)	Enter the maximum emission point temperature from the operating scenario in degrees Fahrenheit. The largest possible temperature allowed is 9,999.9 degrees Fahrenheit.

Completing the Subject Item Group Inventory, AIMS-001P

The Subject Item Group Inventory form, **AIMS-001P**, groups subject items (e.g., emission units) together for the purpose of proposing a cap, an intra-facility emissions trading group, or placing requirements on groups of subject items. The group—which can include mix-and-match member lists of emission units, batch processes, emission unit operating scenarios, batch process operating scenarios, batch process steps, or the entire facility—can be used as a subject item (type “GR”) on the compliance plan for stating emissions limits and other proposed permit requirements.

1. To complete the Subject Item Group Inventory, enter in the form:

GR NJID	Provide a unique numeric identification for each subject item group created. The maximum length of the numeric portion of the ID is six digits. For the ID, enter a number and number it sequentially. An example of the full alphanumeric ID is: GR1.
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Note: The “GR” preface is on the form.

Facility Designation	(optional) Enter the facility’s unique designation for the subject item group (e.g. Tanks 16.4). Since the facility may have the need for several groups in the application, this field can help the facility keep track of individual groups in the application. The maximum size for the facility’s designation of the subject item group is twelve characters.
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3. **Enter a valid Group NJID number and Facility Designation.**
4. **For each subject item you are including as a member of this group, provide the following information:**

Subject Item Type	Enter the subject item group type (e.g. batch process, equipment, etc.) from one of the following choices: BP (Batch Process), E (Equipment), FG (Non-Source Fugitive), IS (Insignificant Source), and U (Emission Unit).
Subject Item ID	Enter the NJID of the item that the requirement, condition, etc. will be applied to. The selection made in the subject type will determine the choices available for the subject item ID. If the batch process was chosen for the subject item type, only the list of batch processes in the application should be chosen from (e.g.BP1, Esters 1). The subject item ID and the Facility’s Designation for the ID should be entered in the fields.

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OS ID

This field will only filled if the Emission Unit or Batch Process subject item types are chosen. Choose one of the operating scenarios contained in the Emission Unit or Batch Process chosen in the subject item ID. The operating scenario NJID and the facility's Designation should be entered in the field.

In addition to the operating scenarios created in the Emission Unit or Batch Process, a summary operating scenario (e.g. OS0) can also be chosen. The summary operating scenario will capture the annual emissions for the Emission Unit or Batch Process. Refer to the Potential to Emit form.

Note: A summary OS will exist when a series of more than one operating scenarios exists.

Note: This portion of the form only has to be filled out if this unit is part of a group.

OS Step

The Operating Scenario Step field is filled only when a batch process operating scenario (other than the OS0 summary operating scenario) is selected.

Reason(s) for Group/Cap

Check one or more of the boxes to select the Formal reason(s) for the creation of the Subject Item Group/Cap. If the "Other" box is checked, the "Other (explain)" field should be populated with an explanation for the Group/CAP need.

Conditions/Requirements

Enter the Conditions or Requirements that will be complied with or are no longer applicable as a result of this Subject item Group.

Operating Circumstances

Discuss the effects that this Subject Item Group will have on the emissions.

Completing the Potential to Emit Forms, AIMS-001Q and AIMS-001R

The Potential to Emit forms, **AIMS-001Q** and **AIMS-001R** are used to report the potential emissions from the facility, each emissions unit operating scenario, or batch process step at a facility. Each application **must** include the Total Potential to Emit for the application. If the application contains Emission Units, the potential to emit values (lbs./hr., tons/yr., etc.) must be entered for emissions units. Likewise, if the application contains Batch Processes, the Potential to Emit values (lbs./step, lbs./batch, tons/yr., etc.) must be included. **If more space is required than is contained on AIMS-001Q, AIMS-001R can be used as a supplement. Otherwise, AIMS-001R does not have to be completed.**

To complete the Potential to Emit forms, **AIMS-001Q and AIMS-001R**, do the following:

1. Enter the type of Subject Item, ID, Operating Scenario, and/or Step you need to define.

Subject Item Type

Enter the subject item type (e.g. Emission Unit (U)), that the Potential to Emit values will be applied to. Choose from the following types: Facility (FC); Equipment (E); Group (GR); Batch Process (BP); and Emission Unit (U).

When the Facility (FC) Subject Item Type is entered, the Subject Item ID, Operating Scenario, and/or Step fields do not need to be filled. The Units column should be populated with tons/yr. The Facility Subject Unit type is utilized to enter the facility's total Potential to Emit in tons per year. Refer to N.J.A.C. 7:27-22.1 or N.J.A.C. 7:27-8.1 for the definition of potential to emit.

Subject Item ID

Enter the Subject Item ID (e.g. U1 Giant Press), that the Potential to Emit values will be applied to. The Subject Item ID chosen will contain the NJID number (e.g. U1) and the facility's designation (e.g. Giant Press). Subject Item IDs chosen have been defined in previous sections of the application (Equipment Inventory, Emission Units, Batch Processes or Subject Item Group Inventory).

Operating Scenario

Enter the Operating Scenario (e.g. OS10 Vitamin A) that the Potential to Emit values will be applied to. The Operating Scenario chosen will contain the NJID number (e.g. OS10) and the facility's designation (e.g. Vitamin A). Operating Scenarios chosen have been defined in previous sections of the application.

OS0 (Summary) is the addition of all emissions from the operating scenarios associated with the Emission Unit (U) or Batch Process (BP) chosen. The Units fields should be populated with tons/yr.

BP OS Step

The Batch Process Operating Scenario Step field should be populated only when a Batch Process Operating Scenario is chosen. Enter the Operating Scenario Step (e.g. ST10 Charging) that the Potential to Emit values will be applied to. Enter the BP Operating Scenario Step NJID number (e.g. ST10) and the facility's designation (e.g. Charging).

ST0 (Summary) is the addition of all emissions from the operating scenario steps associated with the batch process operating scenario chosen.

All other BP Operating Scenario Steps chosen were defined in the Batch Process Inventory section of the application.

Note: Only the pollutants listed on the form, and individual HAPs and "other" contaminants emitted at rates greater than the threshold for reporting (N.J.A.C. 7:27-8, Appendix I or N.J.A.C. 7:27-22, Appendix I), need to be included in the application.

Initial Op. Permit Application - Potential to Emit - BOP970003

Facility: 10040 Documentation4

Subject Item: E 123123 222

Operating Scenario: Step:

Air Contaminant Category/ CAS Number (HAPs)	Fugitive Emissions	Emission Before Controls	Emission After Controls	Total Emissions	Units	Alt. Em. Limit
CO					tons/yr	No
HAPs (Total)					tons/yr	No
NOx (Total)					tons/yr	No
Other (Total)					tons/yr	No
Pb					tons/yr	No
PM-10 (Total)					tons/yr	No
SO2					tons/yr	No
TSP					tons/yr	No
VOC (Total)					tons/yr	No

Copy Table

2. Fill in the required information for each Regulated Air Contaminant Category and individual HAP:

Facility Subject Item Type (FC)

Fugitive Emissions	(Not required for N.J.A.C. 7:27-8 preconstruction applications). Enter the facility's maximum annual total non-source fugitive emissions, of each air contaminant, from the Non-Source Fugitive Emissions form.
Emission Before Control	(Optional) Enter the maximum annual air contaminant emissions before control, of each air contaminant, from all Emission Units and Batch Processes for this facility in tons per year.
Emission After Control	Enter the maximum annual air contaminant emissions after control, of each air contaminant, from all Emission Units and Batch Processes for this facility/application in tons per year. This result is the summation of all the Emission Units and Batch Processes annual emissions. If the annual emission limit is based on a value less than this, you must complete a Facility Compliance Plan to indicate how this emission limit will be verified.
Total Emissions	Enter the maximum annual total air contaminant emissions, of each air contaminant, from this facility in tons per year. The Total Emissions is the summation of the Non-Source Fugitive Emissions and the Emission After Control for this facility. If the annual emission limit is based on a value less than this, you must complete a Facility Compliance Plan to indicate how this emission limit will be verified.
Units	This field is tons per year.
Alt. Em. Limit	If any of the emission limits listed for the facility is entirely (or in part) limited by an Alternative Emission Limit enter "yes". Refer to N.J.A.C. 7:27-19.6 and N.J.A.C. 7:27-22.3(m). An example of an alternative emission limit would be a limit established in accordance with an approved NO _x RACT emissions averaging plan pursuant to N.J.A.C. 7:27-19.6.

Equipment Subject Item Type (E)

Fugitive Emissions	Enter the maximum fugitive emissions, of each air contaminant in pounds per hour. Equipment Fugitive emissions are those emissions from the equipment components and ancillary equipment in the exhaust system. Please refer to the attached guidance document for an explanation and example of equipment fugitive emissions. Do not include fugitive emissions from supply lines to the equipment, and other area fugitives here. Include these in the Non-Source Fugitive Emissions section.
Emission Before Control	Enter the maximum air contaminant emissions before control, of each air contaminant, from the Equipment in pounds per hour. If the equipment does not include a control device, enter the maximum air contaminant emissions from the emission point(s), for this equipment.
Emission After Control	Enter the maximum air contaminant emissions after control, of each air contaminant, from the Equipment in pounds per hour. If the Equipment does not include a control device, enter the maximum air contaminant emissions from the emission point, for this equipment.
Total Emissions	Enter the maximum total air contaminant emissions, of each air contaminant, from this Equipment in pounds per hour. The Total Emissions is the summation of the Fugitive Emissions and the Emission After Control for this Equipment.

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Units	This field is pounds per hour.
Alt. Em. Limit	If any of the emission limits listed for the Equipment are entirely (or in part) limited by an Alternative Emission Limit enter “yes”. Refer to N.J.A.C. 7:27-19.6 and N.J.A.C. 7:27-22.3(m). An example of an alternative emission limit would be a limit established in accordance with an approved NO _x RACT emissions averaging plan pursuant to N.J.A.C. 7:27-19.6.

Group Subject Item Type (GR)

Fugitive Emissions	Enter the maximum fugitive emissions, of each air contaminant, from the Group in the appropriate units type of the Group. Group Fugitive emissions are those emissions from the Group components and ancillary equipment in the exhaust system. Do not include fugitive emissions from supply lines to the equipment, and other area fugitives here. Include these in the Non-Source Fugitive Emissions section.
Emission Before Control	Enter the maximum air contaminant emissions before control, of each air contaminant, from the Group in the appropriate units type of the Group. If the group does not include a control device, enter the maximum air contaminant emissions from the emission point(s), for this group.
Emission After Control	Enter the maximum air contaminant emissions after control, of each air contaminant, from the Group in the appropriate units type for this Group. If the Group does not include a control device, enter the maximum air contaminant emissions from the emission point, for this group.
Total Emissions	Enter the maximum total air contaminant emissions, of each air contaminant, from this Group in the appropriate units type of the Group. The Total Emissions is the summation of the Fugitive Emissions and the Emission After Control for this Group.
Units	Choose the appropriate units type from one of the following types: batches per year; pounds per batch; pounds per hour; pounds per step, and tons per year.
Alt. Em. Limit	If any of the emission limits listed for the group is entirely (or in part) limited by an Alternative Emission Limit enter “yes”. Refer to N.J.A.C. 7:27-19.6 and N.J.A.C. 7:27-22.3(m). An example of an alternative emission limit would be a limit established in accordance with an approved NO _x RACT emissions averaging plan pursuant to N.J.A.C. 7:27-19.6.

Emission Unit Subject Item Type (U)

Operating Scenario Summary (OS0)

Fugitive Emissions	Enter the maximum annual fugitive emissions, of each air contaminant, from all operating scenarios in the Emission Unit in tons per year. Emission Unit Fugitive emissions are those emissions from the emission unit components and ancillary equipment in the exhaust system. Do not include fugitive emissions from supply lines to the equipment, and other area fugitives here. Include these in the Non-Source Fugitive Emissions section.
Emission Before Control	leave this blank

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Emission After Control Enter the maximum air contaminant emissions, from all operating scenarios for this Emission Unit in tons per year. This result is based on 8760 hours of operation per year. If the annual emission limit is based on a value less than this, you must complete an Emission Unit Compliance Plan to indicate how this emission limit will be verified.

Total Emissions Enter the maximum total air contaminant emissions, of each air contaminant, from all operating scenarios for this Emission Unit in tons per year. The Total Emissions is the summation of the Fugitive Emissions and the Emission After Control for this Emission Unit.

Units This field is tons per year.

Alt. Em. Limit Leave this field blank

Operating Scenario

Fugitive Emissions Enter the maximum fugitive emissions, of each air contaminant, for this specific operating scenario in pounds per hour. Emission Unit Fugitive emissions are those emissions from the emission unit components and ancillary equipment in the exhaust system. Do not include fugitive emissions from supply lines to the equipment, and other area fugitives here. Include these in the Non-Source Fugitive Emissions section.

Emission Before Control Enter the maximum air contaminant emissions before control, of each air contaminant, for this operating scenario in pounds per hour. If the operating scenario does not include a control device, enter the maximum air contaminant emissions from the emission point, for this operating scenario.

Emission After Control Enter the maximum air contaminant emissions after control, of each air contaminant, for this operating scenario in pounds per hour. If the operating scenario does not include a control device, enter the maximum air contaminant emissions from the emission point, for this operating scenario.

Total Emissions Enter the maximum total air contaminant emissions, of each air contaminant, from this operating scenario in pounds per hour. The Total Emissions is the summation of the Fugitive Emissions and the Emission After Control for this Operating Scenario.

Units This field is pounds per hour.

Alt. Em. Limit If any of the emission limits listed for the operating scenario is entirely (or in part) limited by an Alternative Emission Limit enter “yes”. Refer to N.J.A.C. 7:27-19.6 and N.J.A.C. 7:27-22.3(m). An example of an alternative emission limit would be a limit established in accordance with an approved NO_x RACT emissions averaging plan pursuant to N.J.A.C. 7:27-19.6.

Batch Process Subject Item Type (BP)

Operating Scenario Summary (OS0)

Fugitive Emissions Enter the maximum annual fugitive emissions, of each air contaminant, from all operating scenarios in the Batch Process in tons per year. Batch Process Fugitive emissions are those emissions from the batch process components and ancillary

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equipment in the exhaust system. Do not include fugitive emissions from supply lines to the equipment, and other area fugitives here. Include these in the Non-Source Fugitive Emissions section.

Emission Before Control	Leave blank
Emission After Control	Enter the maximum air contaminant emissions, from all operating scenarios for this Batch Process in tons per year. This result is based on 8760 hours of operation per year. If the annual emission limit is based on a value less than this, you must complete a Batch Process Compliance Plan to indicate how this emission limit will be verified.
Total Emissions	Enter the maximum total air contaminant emissions, of each air contaminant, from all operating scenarios for this Batch Process in tons per year. The Total Emissions is the summation of the Fugitive Emissions and the Emission After Control for this Batch Process.
Units	This field is tons per year.
Alt. Em. Limit	If any of the emission limits listed for the operating scenario is entirely (or in part) limited by an Alternative Emission Limit enter “yes”. Refer to N.J.A.C. 7:27-19.6 and N.J.A.C. 7:27-22.3(m). An example of an alternative emission limit would be a limit established in accordance with an approved NO _x RACT emissions averaging plan pursuant to N.J.A.C. 7:27-19.6.

Operating Scenario Step Summary (ST0)

Fugitive Emissions	Enter the maximum fugitive emissions, of each air contaminant, from all operating scenario steps in the operating scenario in pounds per batch. Batch Process Fugitive emissions are those emissions from the batch process components and ancillary equipment in the exhaust system. Do not include fugitive emissions from supply lines to the equipment, and other area fugitives here. Include these in the Non-Source Fugitive Emissions section.
Emission Before Control	Enter the maximum air contaminant emissions before control, of each air contaminant, from all operating scenario steps in this operating scenario in pounds per batch. If the operating scenario steps do not include control devices, enter the maximum air contaminant emissions from the emission points, from all the operating scenario steps in this operating scenario.
Emission After Control	Enter the maximum air contaminant emissions after control, of each air contaminant, for this operating scenario in pounds per hour. If the operating scenario does not include a control device, enter the maximum air contaminant emissions from the emission point, for each control, for this operating scenario.
Total Emissions	Enter the maximum total air contaminant emissions, of each air contaminant, from this operating scenario in pounds per hour. The Total Emissions is the summation of the Fugitive Emissions and the Emission After Control for this Operating Scenario.
Units	This field is pounds per batch.
Alt. Em. Limit	If any of the emission limits listed for the operating scenario is entirely (or in part) limited by an Alternative Emission Limit enter “yes”. Refer to N.J.A.C. 7:27-19.6 and N.J.A.C. 7:27-22.3(m). An example of an alternative emission limit would be a limit

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Fugitive Emissions

Emission Before Control

Emission After Control

Total Emissions

Units

Alt. Em. Limit

Note: You must specify individual HAPs and “other” contaminants, emitted from the facility in amounts greater than the threshold for reporting (N.J.A.C. 7:27-8, Appendix I or N.J.A.C. 7:27-22, Appendix I).

Preparing the Compliance Plan and Writing Permit Requirements, AIMS-001S

The following sections explain how to complete a compliance plan and write the permit requirements and is **optional** for paper application submittals. The electronic version of these forms includes standard permit conditions for most source types. It is not practical to attach these to the paper version. However, an applicant could call the helpdesks to receive a copy of the standard conditions for standard conditions for select source and continue to complete this section of the application. This will help the applicant in understanding what permit conditions may be appropriate for the operations in the applications. The compliance plan forms the basis of the permit to be issued by the Department. The items in the compliance plan, once approved by the Department, will become enforceable conditions/requirements placed on the facility. The compliance plan

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Understanding Subject Items

Subject Items are the description of the specific portion of the application you are describing in the conditions. The types of subject items and the conditions they are specific to are listed below:

Batch Process (BP): This subject item includes conditions which are specific to a batch method of operation. Examples include:

Batch Process 1: Total emissions from Batch Process rather than equipment specific emission limits in tons per year, annual reports

Control Device (CD): This subject item includes conditions which are specific to the type of control device used for a specific piece of equipment. Conditions are tailored based on the piece of equipment being controlled. Examples include:

Baghouse for Incinerator: Pressure drop across the baghouse, maximum baghouse inlet temperature, etc.

Thermal Oxidizer: Residence time, minimum temperature, etc.

Equipment (E): This subject item includes conditions which are specific to the type of equipment, and will not change based on how that piece of equipment is operated. See also Emissions Unit below. Examples include:

Boiler:	Maximum gross heat input, NOx RACT annual combustion process adjustments, Total Annual Operating Hours, etc.
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Tank:	Maximum tank capacity, tank orientation (underground or aboveground {UST/AST}), tank operation (pressurized, atmospheric), etc.
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Facility (FC): This subject item includes conditions specific to the entire facility. Examples include:
Nitrogen Oxide Emissions from the entire facility,

Fugitives (FG): This subject item includes conditions specific to fugitive emissions from the facility. This section will be optional for most applications.

Group (GR): This subject item includes conditions specific to a group of sources that function together. Examples include:

A set of boilers: Emissions from the set of boilers, etc.

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Insignificant Source (IS): This subject item includes conditions specific to insignificant sources. This section will be optional for most facilities, but major facilities should complete this section. Examples include:

A 250 gallon tank: Emissions from tank

Emission Point (PT): This subject item includes conditions specific to the location of the actual emissions. Examples include:

Stack: Discharge temperature, velocity, direction, etc.

Window : Length, Width, etc.

Vent: Size, direction, etc.

Emission Unit (U): This subject item relates single or multiple pieces of equipment, control devices and emission points together. This subject item includes conditions which apply to the entire emissions unit. Examples include:

Municipal Wastewater

Treatment Operations: Total Emissions (TPY),
short term emission rates, etc.

VOC Transfer Facilities: Total Emissions, operating hours material transfer rates, etc.

Sludge Composting

Facilities: Total Emissions, operating hours, etc.

Understanding the Compliance Plan

The Compliance Plan form, **AIMS-001S**, is the starting point for developing the compliance plan submitted to NJDEP. Enter a specific subject item and the applicable operating scenario, step(s), or summary of steps for which requirements are being developed.

1. Enter the appropriate Operating Scenario and/or Step (if applicable) for which the requirement is being applied to.

Note: In certain circumstances, it is appropriate to choose an Operating Scenario that is the summary of the individual steps, which would eliminate the need to select a Step.

2. For each requirement entered on the Compliance Plan form complete all information:

- **Applicable Requirement**—See *Defining Revising Limitation Requirements* in this chapter.
- **Monitoring Requirement**—See *Defining Monitoring Requirements* in this chapter.
- **Record Keeping**—See *Defining Recordkeeping Requirements* in this chapter.
- **Submittal or Action**—See *Defining Submittal or Action Requirements* in this chapter.

- **Compliance Status**—Select the appropriate value from the list to indicate the compliance status for this requirement. If applicable, enter a corrective action for a non-compliance status.
- **Comments**—Optional Section for the applicant to include comments on the requirement.

Defining Requirements

A requirement is made up of up to five parts:

- **General Rule**, which is the citation and name of the regulation that requires the condition.
- **Applicable Requirement**, which is a Limitation Requirement.
- **Monitoring Requirement**, which is a description of how the facility should monitor the limitation.
- **Recordkeeping Requirement**, which is a description of how the facility should record the results of monitoring of the limitation.
- **Submittal or Action**, which is a description of what needs to be submitted or performed to demonstrate compliance with the limitation or requirement.

Defining Monitoring Requirements

Only the code values you select for Method (C Code), Frequency (D Code), and Averaging Period (I Code), will appear on the Compliance Plan form. However, the complete text for the associated code will show in the monitoring requirement window accessed by double clicking on these codes. The permit will contain the “preview” text. You can also specify one or more citations for each requirement.

1. **Enter the Parameter (and surrogate parameter, if applicable) for the associated Applicable Requirement.**
2. **Enter the Method (C code), Frequency (D code), and Averaging Period (I code) compliance plan code number (e.g. C011) from the corresponding tables in the Compliance Plan Codes list, Appendix F.**

Defining Recordkeeping Requirements

Only the code values you select for Method (G Code) and Frequency (D Code) appear on the Compliance Plan form. You can also specify one or more citations for each requirement.

The Parameter (and surrogate Parameter, if applicable) for the associated Applicable Requirement (limit or text) is displayed in the Applicable Requirement field.

To define a recordkeeping requirement, do the following:

Enter the Method (G code) and Frequency (D code) compliance plan code number (e.g. D0008) from the corresponding tables in the Compliance Plan Codes list, Appendix F.

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Defining Submittal or Action Requirements

Only the selected code values for Type (J Code) and Schedule (F Code) will appear on the Compliance Plan form. You can specify one or more citations for each requirement.

- 1. Enter the Submittal/Action Type (J code) and Schedule (F code) compliance plan code number (e.g. J017) from the Compliance Plan Codes list, Appendix F.**
- 2. Enter the Compliance Status (E code) compliance plan code number (e.g. E001) from the Compliance Plan Codes list, Appendix F.**

If you select the “Other” Schedule value, attach a page that contains the schedule.

Defining a Corrective Action

Note: You cannot define a corrective action for a requirement that is already in compliance. A corrective action is a separate line, which only allows completion of the submittal or action section.

If, in the Compliance Status column of a requirement row, you mark a requirement as out of compliance, you need to propose a corrective action. To add a corrective action to any requirement listed on the Compliance Plan form, do the following:

- 1. Enter the value “CA” in the Compliance Status field**
- 2. Fill out the Submittal/Action Requirement for the corrective action according to the procedures given for completing requirements.**

Completing the Certification Form, AIMS-001T

The Certification form, **AIMS-001T**, contains two certifications necessary for permit application submittal. The applicant must designate a **“Responsible Official”** to certify the application as true, accurate, and complete. In general, the “Responsible Official” would be a corporate officer (for corporations), a general partner (for partnerships), or a proprietor (for sole proprietors). One or more **“Individuals with Direct Knowledge”** and responsibility for the information contained within the permit application need to certify the information as true, accurate and complete.

To complete the Certification form, **AIMS-001T**, do the following:

- 1. Fill out the Certification information on the form**

Responsible Official

The facility official responsible for the Subchapter 22 Operating Permit. A Responsible Official as defined in N.J.A.C. 7:27-1.4 is as follows:

- For a corporation: either a corporate officer such as a president, secretary, treasurer, or vice-president of the corporation, or a duly authorized representative responsible for overall operation of a facility (plant manager, etc.) if the facility employs 250 persons or has at least \$25 million in sales or expenditures and delegation of authority has been approved by the NJDEP in advance.

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- For a partnership: a general partner.
- For a sole proprietorship: the proprietor.
- For a government agency: the principal executive officer or ranking elected official.

Individuals

This certification can have more than one signature. If you provide more than one, follow the same format.

- Any person with direct knowledge of and responsibility for the information contained in the document.
- Consultants with direct knowledge of information contained in the document.

Section of Application

Indicate which part of the application the individual selected above is certifying. You may refer to any section or answer ALL in the space provided. All parts of the application must be certified.

2. Sign the Certifications

The Department recommends that the certifications should not be signed until the application is completed and ready to be submitted.

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Appendix A:

Instructions for AIMS099 Form:

Facility ID and PIN Code Assignment for RADIUS Submittal

INSTRUCTIONS FOR SUBMITTING FORM AIMS - 099 “FACILITY ID AND PIN CODE ASSIGNMENT FOR RADIUS SUBMITTAL”.

Part A (Page One)

- Facility Name: Enter the name of the facility for which a submittal will be sent to the Department.
- Street Address: Enter the street address of the facility's physical location.
- Address Line 2: Use this line (if needed) to describe the location e.g. suite 3.
- Address Line 3: Use this line (if needed) to describe the location e.g. 5th floor.
- City: Enter the municipality in which the facility is physically located.
- State: Enter NJ
- Zip: Enter the Zip Code
- Mailing Address: Enter the street address or P.O. Box where the facility receives mail.
- Address Line 2: Only use this line if needed to pinpoint the mailing address.
- Address Line 3: Only use this line if needed to pinpoint the mailing address.
- City: Enter the municipality of the facility.
- State: Enter the state in which the facility receives mail.
- Zip: Enter the Zip Code of the municipality in which the facility receives mail.
- County Location of Facility: Enter the facility's county location, not its mailing address county.
- Location Description: Describe the facility's location if its difficult to find using the street address.
- State Plane Coordinates: Enter the facility's state plane coordinates for the center point of the facility. These fields are optional, but they do help the Department geographic information system understand more about the state's environment.
- Coordinate Unit: Choose the correct coordinate unit.
- Coordinate Datum: The official survey base of the state is known as the New Jersey State Plane Coordinate System whose geodetic positions have been adjusted on the **North American Datum of 1983 (NAD83)** as per Chapter 218, Laws of

New Jersey 1989. Choose the Datum (reference point), that the State Plane Coordinates entered above are based on, from one of the following choices: NAD27, **NAD83**, or Other. (Note: The previous Datum was NAD27 and some coordinates may still be expressed in the old datum). If you have any questions regarding State Plane Coordinates please contact the GIS Hotline at (609) 777-0672.

Coordinate Source
Origin:

Enter the source of the state plane coordinates from one of the following: County, DEP-GIS, DEP Program, EPA, other/unknown, or submittal document. (Note: *Source Origin* refers to the agency or company that supplied the coordinates).

Coordinate Source
Type:

Enter the type of the source for the state plane coordinates from one of the following: Address match, DEP program database, digital image, GPS, hard copy map, or other/unknown. (Note: *Source Type* refers to the method from which the coordinates were derived

Primary SIC:

Enter the facility's primary Standard Industrial Classification (SIC) Code as determined by the New Jersey Secretary of State. The SIC Code is registered with the U.S. Department of Labor, call (609) 272-2633.

Secondary SIC:

Enter the facility's secondary SIC (if any).

Part A (Page Two)

Contact Type:

From the list below choose one "Contact Type" that best describes the name of the person completing this form.

Name:

Enter the contact's name.

Title:

Enter the contact's title.

Phone:

Enter the contact's phone number.

Fax:

Enter the contact's telefax number (optional).

Other:

Enter another telephone for the contact.

Type:

Choose FAX; mobile; modem; pager or toll free.

E-mail: Enter the contact's electronic mail address.

Organization: Enter the contact's organization. Important if the contact is not associated with the facility.

Organization Type: Choose Federal; Local; Private; Public; State or Utility.

NJ EIN: Enter the contact's eleven digit Employer Identification Number (optional).

Mailing Address: Enter the contact's mailing address.

Check Boxes: If you represent the facility in more than one way you may "x" any box that applies.

Part B

Facility ID: Enter the facility ID (if known)

Facility Name: Enter the name of the facility.

Street address: Enter the facility's street address (If only completing Part B of this form.)

City: Enter the facility's municipality (If only completing Part B of this form.)

Zip: Enter the facility's zip code (If only completing Part B of this form).

This form allows for the assignments of three PIN numbers for three different personnel. You may file for one to three different personnel on this form.

For each person give the name, title and phone number. Enter a seven (7) alpha/numeric character in the space provided and check whether this person is a responsible official with the facility.

Keep a copy of this form for your records and return to the Department at the address indicated above.
NOTE: This PIN number must be entered into the AIMS (Air Information Management System) in order for you to submit data to the Department electronically.

Appendix B:

Control Device Inventory Information Forms (Details Window) **Instructions**

<u>FORMS</u>	<u>TITLE</u>	<u>PAGE</u>
AIMS-CD-001	ALL CONTROLS	1
AIMS-CD-002	ADSORBER	2
AIMS-CD-003	BIOFILTER	5
AIMS-CD-004	CONDENSER	7
AIMS-CD-005	CYCLONE	9
AIMS-CD-006	ELECTROSTATIC PRECIPITATOR	11
AIMS-CD-007	FLARE	13
AIMS-CD-008	OTHER	15
AIMS-CD-009	OXIDIZER (CATALYTIC)	16
AIMS-CD-010	OXIDIZER (THERMAL)	18
AIMS-CD-011	PARTICULATE FILTER (BAGHOUSE)	19
AIMS-CD-012	PARTICULATE FILTER (CARTRIDGE)	21
AIMS-CD-013	PARTICULATE FILTER (HEPA)	23
AIMS-CD-014	PARTICULATE FILTER (OTHER)	25
AIMS-CD-015	SCRUBBER (MULTI-STAGE)	27
AIMS-CD-016	SCRUBBER (OTHER)	29
AIMS-CD-017	SCRUBBER (PACKED TOWER)	32
AIMS-CD-018	SCRUBBER (VENTURI)	35
AIMS-CD-019	SELECTIVE CATALYTIC REDUCTION	38
AIMS-CD-020	SELECTIVE NON-CATALYTIC REDUCTION	40

Control Device: All Control Devices (AIMS-CD-001)

Instructions for filling out the All Control Device Control Device Inventory Information Form (details window).

This form must be attached to all Control Device Inventory Information Forms (AIMS-CD-002 -> AIMS-CD-020).

CD Enter the Control Device NJID of the control device for which the information is being applied to.

Enter the control device design removal efficiencies for each air contaminant category (or individual HAP or Other emitted above the reporting threshold in Sub. 8 or Sub. 22) for the control device identified above.

CONTROL DEVICE DESIGN EFFICIENCY TABLE

Pollutant Category	Design Removal Efficiency (percent)
PM-10	
TSP	
VOC	
NO _x	
SO ₂	
CO	
Pb	
HAP(s) (Total)	
Other (Total)	
Individual HAPs/OTHER (speciated below)	

Control Device: Adsorber (AIMS-CD-002)

Instructions for filling out the Adsorber Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for operating permits)
Model	Enter the model of the control device. (optional for an initial operating permit)
Type of Adsorber	Enter the adsorber type. Choose from one of the following types: Fixed(Regenerative), Fixed(Non-Regenerative), Rotary, Fluidized, and Other. (optional for an initial operating permit)
Description	Enter only when the unit type entered is "other". (optional for an initial operating permit)
Maximum Flow Rate	Enter the maximum gas flow rate to the adsorber, Qmax, in acfm.
Maximum Temperature	Enter the maximum temperature of the vapor stream to the adsorber, Tmax, in deg. F.
Minimum Temperature	Enter the minimum temperature of the vapor stream to the adsorber, Tmin, in deg. F.
Minimum Moisture Content	Enter the minimum moisture content of the vapor stream to the adsorber in percent. (optional for an initial operating permit)
Type of Adsorbant	Enter the type of adsorbant used. (optional for an initial operating permit)
Bed Height	Enter the height of the adsorber bed, Hb. (optional for an initial operating permit)
Bed Length	Enter the length of the adsorber bed, Lb. (optional for an initial operating permit)
Bed Width	Enter the width of the adsorber bed, Wb. (optional for an initial operating permit)
Units	Enter the units used. The most common units used are feet. (optional for an initial operating permit)
Other Bed Dimension	Enter only if other another important bed dimension is required. (optional for an initial operating permit)
Value	Enter the value only if there is an entry for "other bed dimension". (optional for an initial operating permit)
Units	Enter the units only if there is an entry for "other bed dimension". (optional for an initial operating permit)
Minimum Pressure Drop	Enter the minimum pressure drop across the adsorber in inches H ₂ O. (optional for an initial operating permit)
Maximum Pressure Drop	Enter the maximum pressure drop across the adsorber in inches H ₂ O. (optional for an initial operating permit)
Total Weight of Adsorbant	Enter the total weight of the adsorbant in pounds.

Total Saturated Weight	Enter the total weight of the adsorbant, when saturated, in pounds. (optional for an initial operating permit)
Maximum Adsorbant Capacity	Enter the maximum capacity of the adsorbant in lbs. adsorbate/lbs. adsorbant. (optional for an initial operating permit)
Minimum Adsorbant Capacity	Enter the minimum capacity of the adsorbant in lbs. adsorbate/lbs. adsorbant. (optional for an initial operating permit)
Setup Type	Enter the Set-up type or configuration of the adsorber from one of the following types: Parallel, Series, etc. (optional for an initial operating permit)
Breakthrough Determination:	Enter the method of determining breakthrough (check all that apply).
Contin. Emiss. Mon.	Enter if breakthrough is determined using a continuous emission monitor (CEM).
Replacement by Weight	Enter if breakthrough is determined by calculating the replacement by weight.
Periodic Testing	Enter if breakthrough is determined by periodic testing.
Sampling Frequency	Enter only if “periodic testing” is selected.
Sampling Device	Enter only if “periodic testing” is selected.
Other	Enter if breakthrough is determined by another method.
Description	Enter only if “other” is selected.
Breakthrough Concentration	Enter the minimum concentration at breakthrough, Cmin, in ppmvd.
Handling Method:	Enter the handling method of the saturated adsorbant from one of the following types: Disposed Off-site, Regenerated On-site, Sent away for Regeneration, and Other. If Other, describe the method. (optional for an initial operating permit)
Regeneration Method	Enter the regeneration method if the handling method option is “regenerated on-site.” (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter “yes” if data from any recent performance testing are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” manufacturer’s data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location of the control device, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Biofilter (AIMS-CD-003)

Instructions for filling out the Biofilter Control Device Inventory Information (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Maximum Flow Rate	Enter the maximum gas flow rate to the biofilter, Qmax, in acfm.
Maximum Temperature	Enter the maximum temperature of the vapor stream to the biofilter, Tmax, in deg. F.
Minimum Temperature	Enter the minimum temperature of the vapor stream to the biofilter, Tmin, in deg. F.
Minimum Moisture Content	Enter the minimum moisture content of the vapor stream to the biofilter in percent.
Bed Composition	Enter information about the bed composition. (optional for an initial operating permit)
Type of Adsorbate	Enter the type of adsorbate used. (optional for an initial operating permit)
Bed Height	Enter the height of the biofilter bed, Hb. (optional for an initial operating permit)
Bed Length	Enter the length of the biofilter bed, Lb. (optional for an initial operating permit)
Bed Width	Enter the width of the biofilter bed, Wb. (optional for an initial operating permit)
Units	Enter the units used. The most common units used are feet. (optional for an initial operating permit)
Other Bed Dimension	Enter only if other another important bed dimension is required. (optional for an initial operating permit)
Value	Enter the value only if there is an entry for "other bed dimension". (optional for an initial operating permit)
Units	Enter the units only if there is an entry for "other bed dimension". (optional for an initial operating permit)
Minimum Pressure Drop	Enter the minimum pressure drop across the biofilter in inches H ₂ O.
Maximum Pressure Drop	Enter the maximum pressure drop across the biofilter in inches H ₂ O.
Bed Activity	Enter the biofilter bed activity in pH.
Bed Moisture Determination	Enter the method used to maintain bed moisture. (optional for an initial operating permit)
Bed Activity Determination	Enter the method used to determine bed activity. (optional for an initial operating permit)
Bed Temp. Determination	Enter the method used to determine bed temperature.(optional for an initial operating permit)

Reactivate Biofilter Material	Enter the method used to reactivate biofilter material.
When Biofilter is Reactivated	Enter the method used to determine when the biofilter should be reactivated. (optional for an initial operating permit)
Disposal of Material	Enter the method used to dispose of the biofilter material. (optional for an initial operating permit)
Is Biofilter Covered?	Enter “yes” if the biofilter is covered. Otherwise, enter “no.” (optional for an initial operating permit)
Is Biofilter Heated?	Enter “yes” if the biofilter is heated. Otherwise, enter “no.” (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter “yes” if data from any recent performance testing are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location of the control device, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Condenser (AIMS-CD-004)

Instructions for filling out the Condenser Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Type of Condenser	Enter the condenser type from one of the following types: tube & shell, or Other. If other, describe the type. Note: direct contact condensers (Spray Towers, etc.) belong on one of the scrubber details windows. (optional for an initial operating permit)
Type of Shell Material	Enter the type of material of which the shell is constructed. (optional for an initial operating permit)
Type of Tube Material	Enter the type of material of which the tubes are constructed. (optional for an initial operating permit)
Minimum Temperature	Enter the minimum temperature of the vapor stream to the condenser, T _{min} , in deg. F. (optional for an initial operating permit)
Maximum Temperature	Enter the maximum temperature of the vapor stream to the condenser, T _{max} , in deg. F. (optional for an initial operating permit)
Heat Transfer Area	Enter the heat transfer surface (contact) area, A, in ft ² . (optional for an initial operating permit)
Maximum Flow Rate	Enter the maximum gas flow rate to the condenser, Q _{max} , in acfm. (optional for an initial operating permit)
Minimum Flow Rate	Enter the minimum cooling medium flow rate, Q _{min} , in gpm.
Maximum Flow Rate	Enter the maximum cooling medium flow rate, Q _{max} , in gpm.
Minimum Heat Removal	Enter the minimum heat removal capacity in Btu/hr. (optional for an initial operating permit)
Flow Ratio	Enter the liquid-to-gas flow ratio for optimal efficiency. (optional for an initial operating permit)
Min. Cooling Inlet Temp.	Enter the minimum cooling medium inlet temperature in deg. F.
Max. Cooling Inlet Temp.	Enter the maximum cooling medium inlet temperature in deg. F.
Min. Cooling Outlet Temp.	Enter the minimum cooling medium outlet temperature in deg. F.
Max. Cooling Outlet Temp.	Enter the maximum cooling medium outlet temperature in deg. F.
Min. Gas Outlet Temperature	Enter the minimum gas stream outlet temperature in deg. F.
Max. Gas Outlet Temperature	Enter the maximum gas stream outlet temperature in deg. F.

Min. Condensate Outlet Temp.	Enter the minimum condensate outlet temperature in deg. F.
Max. Condensate Outlet Temp.	Enter the maximum condensate outlet temperature in deg. F.
Cooling Medium	Enter the type of cooling medium used. (optional for an initial operating permit)
Use of Condenser	Enter the use of the condenser. Choose either "Process (Reflux)" or "Air Pollution Control". (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Cyclone (AIMS-CD-005)

Instructions for filling out the Cyclone Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Unit Type	Enter the cyclone type. Choose either Single Cyclone, Multiple Cyclone, or Other.
Description	If Other is entered for Unit Type, describe the cyclone type.
Major Cylinder Diameter	Enter the major cylinder diameter of the cyclone, Dc, in feet.
Major Cylinder Length	Enter the major cylinder length of the cyclone, Lc, in feet.
Gas Outlet Diameter	Enter the gas outlet diameter of the cyclone, De, in feet. (optional for an initial operating permit)
Gas Inlet Height	Enter the gas inlet height of the cyclone, He, in feet. (optional for an initial operating permit)
Gas Inlet Width	Enter the gas inlet width of the cyclone, Bc, in feet. (optional for an initial operating permit)
Gas Outlet Length	Enter the gas outlet length of the cyclone, Hc + Sc (generally 5/8 Dc), in feet. (optional for an initial operating permit)
Cone Length	Enter the length of the cyclone cone, Zc, in feet. (optional for an initial operating permit)
Dust Outlet Diameter	Enter the diameter of the dust outlet, Jc, in feet. (optional for an initial operating permit)
Number of Turns	Enter the effective number of turns, Ne. (optional for an initial operating permit)
Inlet Gas Velocity	Enter the inlet gas velocity, Vi, feet/min. (optional for an initial operating permit)
True Particle Density	Enter the true particle density in lbs/ft ³ . (optional for an initial operating permit)
Average Particle Size	Enter the average particle size in micrometers. (optional for an initial operating permit)
Gas Temperature	Enter the gas temperature in deg. F. (optional for an initial operating permit)
Particle Size Dist. Analysis?	Enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.

Recent Testing?	Enter “yes” if data from any recent performance testing are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location of the control device, is attached. Otherwise, choose/enter “no.”
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Electrostatic Precipitation (ESP) (AIMS-CD-006)

Instructions for filling out the Electrostatic Precipitator (ESP) Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Unit Type	Enter the ESP type from one of the following types: Tube, Plate, or Other. (optional for an initial operating permit)
Description	If Other is entered for Unit Type, describe the ESP type.
Number of Stages	Enter the number of stages of the ESP.
Method of Operation	Enter the method of operation of the ESP from one of the following methods: Wet, Dry, or Other. If Other, describe the method.
Method of Cleaning	Enter the method of cleaning of the ESP from one of the following methods: Rapping, Gravity, Wash Off, or Other. If Other, describe the method.
Description	If Other is entered for Method of Cleaning, describe the cleaning type.
Capacity	Enter the capacity of the ESP in acfm.
Maximum Gas Velocity	Enter the maximum gas velocity, Vmax, feet/min. (optional for an initial operating permit)
Type of Rectifier	Enter the type of rectifier used in the ESP. Enter either "tube" or "solid state". (optional for an initial operating permit)
Max. Inlet Gas Moisture	Enter the maximum inlet gas stream moisture in percent.
Max. Inlet Gas Temperature	Enter the maximum inlet gas stream temperature in deg. F.
Number of Plates	Enter the number of plates.
Number of Fields	Enter the number of fields. (optional for an initial operating permit)
Aspect Ratio	Enter the aspect ratio. (optional for an initial operating permit)
Plate Surface Area	Enter the plate surface area in ft ² . (optional for an initial operating permit)
Plate Spacing	Enter the spacing between plates in inches.
Area of Precipitator	Enter the cross-sectional area of the precipitator in ft ² .
Treatment Time	Enter the treatment time in seconds. (optional for an initial operating permit)
Maximum Corona Power	Enter the maximum corona power in volts. (optional for an initial operating permit)

Minimum Migration Velocity	Enter the minimum apparent migration velocity in ft/min. (optional for an initial operating permit)
Maximum Particle Resistivity	Enter the maximum particle resistivity in ohm-cm. (optional for an initial operating permit)
Average Particle Size	Enter the average particle size in micrometers. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter “yes” if data from any recent performance testing are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location of the control device, is attached. Otherwise, enter “no.”
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Flare (AIMS-CD-007)

Instructions for filling out the Flare Control Device Inventory Information (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Unit Type	Enter the flare type from one of the following choices: "open" or "enclosed".
Minimum Residence Time	Enter the minimum residence time of the flare in seconds. Enter only when the unit type entered is "enclosed". (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input of the flare in MMBtu/hr. (optional for an initial operating permit)
Auxiliary Fuel	Enter the type of auxiliary fuel used in the flare from one of the following types: Natural Gas, No. 2 Oil, or Other. If Other, describe the type of fuel used.
Pilot Flame Monitoring	Enter the method of pilot flame monitoring for the flare.
Monitoring Location	Enter the monitoring location from one of the following choices: remote" or "local".
Automatic Gas Shutoff?	Enter "yes" if the flare employs an automatic gas shutoff after the loss of a flame. Otherwise, enter "no."
Automatic Gas Reignition?	Enter "yes" if the flare employs an automatic gas reignition after the loss of a flame. Otherwise, enter "no."
Minimum Gas Flow Rate	Enter the minimum gas flow rate in acfm. (optional for an initial operating permit)
Min. Operating Temperature	Enter the minimum operating temperature only when the unit type entered is "enclosed". (optional for an initial operating permit)
Min. Heat Content at Tip	Enter the minimum heat content at the burner tip, in Btu/ft3.
Flare Operation Type	Enter the flare operation type from one of the following types: Emergency Use, Continuous, or Other. If other, describe the use.
Smokeless Design?	Enter "yes" if the flare has a smokeless design. Otherwise, enter "no." (optional for an initial operating permit)
Flame Retainer?	Enter "yes" if the flare is equipped with a flame retainer. Otherwise, enter "no." (optional for an initial operating permit)
Flame Arrestor?	Enter "yes" if the flare is equipped with a flame arrestor. Otherwise, enter "no." (optional for an initial operating permit)
LEL Monitor?	Enter "yes" if the flare is equipped with a lower emission limit (LEL) monitor. Otherwise, enter "no." (optional for an initial operating permit)
Flare Stack Diameter	Enter the flare stack diameter in inches. (optional for an initial operating permit)

Lower Heat Content (Source)	Enter the lower heat content of the source gas in Btu/scf.
Lower Heat Content (Suppl.)	Enter the lower heat content of the supplemental fuel in Btu/scf.
Destruc. and Remov. Effic.	Enter values only when the unit type entered is “enclosed”. (optional for an initial operating permit)
How Efficiency Determined?	Enter only when the unit type entered is “enclosed”. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter “yes” if data from any recent performance testing are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location of the control device, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Other (AIMS-CD-008)

Instructions for filling out the Other Control Device Inventory Information (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Maximum Flow Rate	Enter the maximum gas flow rate to the “other” control device, Omax, in acfm.
Maximum Temperature	Enter the maximum temperature of the vapor stream to the “other” control device, Tmax, in deg. F.
Minimum Temperature	Enter the minimum temperature of the vapor stream to the “other” control device, Tmin, in deg. F.
Minimum Moisture Content	Enter the minimum moisture content of the vapor stream to the “other” control device, in percent.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water.
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water.
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter “yes” if data from any recent performance testing are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location of the control device, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Oxidizer, (Catalytic) (AIMS-CD-009)

Instructions for filling out the Catalytic Oxidizer Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Minimum Inlet Temperature	Enter the minimum inlet Temperature in deg. F. (optional for an initial operating permit)
Maximum Inlet Temperature	Enter the maximum inlet Temperature in deg. F. (optional for an initial operating permit)
Minimum Outlet Temperature	Enter the minimum outlet Temperature in deg. F.
Maximum Outlet Temperature	Enter the maximum outlet Temperature in deg. F.
Minimum Residence Time	Enter the minimum residence time in seconds. (optional for an initial operating permit)
Fuel Type	Enter the fuel type from one of the following types: Natural Gas, No. 2 Oil, or Other. If Other, describe the type of fuel used.
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Minimum Pressure Drop	Enter the minimum pressure drop across the catalyst in psi. (optional for an initial operating permit)
Maximum Pressure Drop	Enter the maximum pressure drop across the catalyst in psi. (optional for an initial operating permit)
Catalyst Material	Enter the catalyst material used.
Form of Catalyst	Enter the type of form of the catalyst from one of the following choices: Honeycomb, Plate, or Other. If Other, describe the form.
Minimum Expected Life	Enter the minimum expected life of the catalyst.
Units	Enter the units of the maximum expected life from one of the following choices: Hours, Years, or Other. If Other, describe the choice.
Volume of Catalyst	Enter the volume of the catalyst in ft ³ . (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)

Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Oxidizer, Thermal (AIMS-CD-010)

Instructions for filling out the Thermal Oxidizer Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Minimum Chamber Temp.	Enter the minimum chamber Temperature in deg. F.
Minimum Residence Time	Enter the minimum residence time in seconds.
Fuel Type	Enter the fuel type from one of the following types: Natural Gas, No. 2 Oil, or Other. If Other, describe the fuel type.
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Particulate Filter, (Baghouse) (AIMS-CD-011)

Instructions for filling out the Baghouse Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Number of Bags	Enter the number of bags.
Size of Bags	Enter the size of each bag in ft ² .
Total Bag Area	Enter the total bag area in ft ² .
Bag Fabric	Enter the bag fabric.
Fabric Weight	Enter the fabric weight in oz/ft.
Fabric Weave	Enter the fabric weave.
Fabric Finish	Enter the fabric finish.
Maximum Design Temp.	Enter the maximum design temperature capability in deg. F. (optional for an initial operating permit)
Maximum Design Air Flow	Enter the maximum design air flow rate in acfm. (optional for an initial operating permit)
Draft Type	Enter the draft type from one of the following types: "Induced Draft" or "Forced Draft". (optional for an initial operating permit)
Flow Rate-to Cloth Area Ratio	Enter the maximum air flow rate-to cloth area ratio.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water.
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water.
Monitoring Pressure Drop	Enter the method of monitoring pressure drop. (optional for an initial operating permit)
Maximum Inlet Temp.	Enter the maximum inlet temperature in deg. F.
Minimum Inlet Temp.	Enter the minimum inlet temperature in deg. F.
Dew Point of Gas Steam	Enter the dew point of the gas stream in deg. F. (optional for an initial operating permit)
Max. Operating Exhaust Rate	Enter the maximum operating exhaust gas flow rate in acfm.
Max. Inlet Moisture Content	Enter the maximum inlet gas stream moisture content in percent. (optional for an initial operating permit)
When Replacement is Required	Enter the method for determining when bag replacement is required. (optional for an initial operating permit)

When Cleaning is Required	Enter the method for determining when bag cleaning is required. (optional for an initial operating permit)
Method of Cleaning	Enter the method of bag cleaning from one of the following methods: Reverse Air, Pulse Jet, Mechanical Shaking, or Other. If Other, describe the method.
Bag Cleaning On Line?	Enter "yes" if the bag cleaning is conducted on line. Otherwise, enter "no." (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	Enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Particulate Filter, (Cartridge) (AIMS-CD-012)

Instructions for filling out the Cartridge Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Number of Cartridges	Enter the number of cartridges.
Size of Cartridges	Enter the size of cartridges in ft ² .
Total Cartridge Area	Enter the total cartridge area in ft ² .
Maximum Design Temp.	Enter the maximum design temperature capability in deg. F. (optional for an initial operating permit)
Maximum Design Air Flow	Enter the maximum design air flow rate in acfm. (optional for an initial operating permit)
Flow Rate-to-Filter Area Ratio	Enter the maximum air flow rate-to-filter area ratio.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water.
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water.
Maximum Inlet Temp.	Enter the maximum inlet temperature in deg. F.
Max. Operating Exhaust Rate	Enter the maximum operating exhaust gas flow rate in acfm.
When Replacement is Required	Enter the method for determining when cartridge replacement is required. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	Enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Particulate Filter, (HEPA) (AIMS-CD-013)

Instructions for filling out the High Efficiency Particulate Arrestor (HEPA) Particulate Filter Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Filter Description	Enter a description of the filters.
Total Filter Area	Enter the total filter area in ft ² .
Maximum Design Temp.	Enter the maximum design temperature capability in deg. F. (optional for an initial operating permit)
Maximum Design Air Flow	Enter the maximum design air flow rate in acfm. (optional for an initial operating permit)
Flow Rate-to-Filter Area Ratio	Enter the maximum air flow rate-to-filter area ratio.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water.
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water.
Maximum Inlet Temp.	Enter the maximum inlet temperature in deg. F.
Max. Operating Exhaust Rate	Enter the maximum operating exhaust gas flow rate in acfm.
When Replacement is Required	Enter the method for determining when filter replacement is required. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	Enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Particulate Filter, (Other) (AIMS-CD-014)

Instructions for filling out the Other Particulate Filter Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Filter Description	Enter a description of the filters.
Total Filter Area	Enter the total filter area in ft ² .
Maximum Design Temp.	Enter the maximum design temperature capability in deg. F. (optional for an initial operating permit)
Maximum Design Air Flow	Enter the maximum design air flow rate in acfm. (optional for an initial operating permit)
Flow Rate-to-Filter Area Ratio	Enter the maximum air flow rate-to-filter area ratio.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water.
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water.
Maximum Inlet Temp.	Enter the maximum inlet temperature in deg. F.
Max. Operating Exhaust Rate	Enter the maximum operating exhaust gas flow rate in acfm.
When Replacement is Required	Enter the method for determining when filter replacement is required. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	Enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Scrubber, (Multi-Stage) (AIMS-CD-015)

Instructions for filling out the Multi-Stage Scrubber Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Number of Stages	Enter the number of stages in the scrubber. (optional for an initial operating permit)
Particulate Control?	Enter “yes” if the scrubber is used for particulate control. Otherwise, enter “no.” (optional for an initial operating permit)
Gas Control?	Enter “yes” if the scrubber is used for gas control. Otherwise, enter “no.” (optional for an initial operating permit)
Mist Eliminator?	Enter “yes” if the scrubber is equipped with a mist eliminator. Otherwise, enter “no.” (optional for an initial operating permit)
Min. Discharge Pressure	Enter the minimum pump discharge pressure in inches of water. (optional for an initial operating permit)
Max. Discharge Pressure	Enter the maximum pump discharge pressure in inches of water. (optional for an initial operating permit)
Monitoring Pressure	Enter the method of monitoring pump discharge pressure. (optional for an initial operating permit)
Minimum Pump Current	Enter the minimum pump current in amps. (optional for an initial operating permit)
Maximum Pump Current	Enter the maximum pump current in amps. (optional for an initial operating permit)
Monitoring Current	Enter the method of monitoring pump discharge current in amps. (optional for an initial operating permit)
Minimum Inlet Pressure	Enter the minimum scrubber medium inlet pressure in inches of water. (optional for an initial operating permit)
Min. Liquid Flow Rate	Enter the minimum operating liquid flow rate in gpm.
Max. Liquid Flow Rate	Enter the maximum operating liquid flow rate in gpm.
Monitoring Liquid Flow Rate	Enter the method of monitoring the liquid flow rate.
Minimum Gas Flow Rate	Enter the minimum operating gas flow rate in gpm.
Maximum Gas Flow Rate	Enter the maximum operating gas flow rate in gpm.
Monitoring Gas Flow Rate	Enter the method of monitoring the gas flow rate.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water. (optional for an initial operating permit)

Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water. (optional for an initial operating permit)
Monitoring Pressure Drop	Enter the method of monitoring the pressure drop. (optional for an initial operating permit)
Direction of Gas-Liquid Flow	Enter the relative direction of the gas-liquid flow from one of the following directions: Co-Current, Counter-Current, or Other. If Other, describe the direction.
Maximum Inlet Temp.	Enter the maximum operating temperature of the inlet gas in deg. F.
Maximum Outlet Temp.	Enter the maximum operating temperature of the outlet gas in deg. F.
Inlet Grain Loading	Enter the inlet particle grain loading in gr./dscf. when the scrubber is used for particulate control. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	Enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Scrubber, (Other) (AIMS-CD-016)

Instructions for filling out the Scrubber (Other) Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Scrubber Type	Enter the scrubber type from one of the following types: Tray Tower, Spray Tower, or Other.
Description	If "Other" is chosen for "Scrubber Type" (see above question), describe the scrubber type.
Particulate Control?	Enter "yes" if the scrubber is used for particulate control. Otherwise, enter "no." (optional for an initial operating permit)
Gas Control?	Enter "yes" if the scrubber is used for gas control. Otherwise, enter "no." (optional for an initial operating permit)
Mist Eliminator?	Enter "yes" if the scrubber is equipped with a mist eliminator. Otherwise, enter "no." (optional for an initial operating permit)
Min. Discharge Pressure	Enter the minimum pump discharge pressure in inches of water. (optional for an initial operating permit)
Max. Discharge Pressure	Enter the maximum pump discharge pressure in inches of water. (optional for an initial operating permit)
Monitoring Pressure	Enter the method of monitoring pump discharge pressure. (optional for an initial operating permit)
Minimum Pump Current	Enter the minimum pump current in amps. (optional for an initial operating permit)
Maximum Pump Current	Enter the maximum pump current in amps. (optional for an initial operating permit)
Monitoring Current	Enter the method of monitoring pump discharge current in amps. (optional for an initial operating permit)
Minimum Inlet Pressure	Enter the minimum scrubber medium inlet pressure in inches of water. (optional for an initial operating permit)
Min. Liquid Flow Rate	Enter the minimum operating liquid flow rate in gpm.
Max. Liquid Flow Rate	Enter the maximum operating liquid flow rate in gpm.
Monitoring Liquid Flow Rate	Enter the method of monitoring the liquid flow rate.
Minimum Gas Flow Rate	Enter the minimum operating gas flow rate in gpm.
Maximum Gas Flow Rate	Enter the maximum operating gas flow rate in gpm.
Monitoring Gas Flow Rate	Enter the method of monitoring the gas flow rate.

Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water. (optional for an initial operating permit)
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water. (optional for an initial operating permit)
Monitoring Pressure Drop	Enter the method of monitoring the pressure drop. (optional for an initial operating permit)
Direction of Gas-Liquid Flow	Enter the relative direction of the gas-liquid flow from one of the following directions: Co-Current, Counter-Current, or Other. If Other, describe the direction.
Number of Plates	Enter the number of plates only when the scrubber type entered is "Tray Tower". (optional for an initial operating permit)
Type of Plates	Enter the type of plates only when the scrubber type entered is "Tray Tower". (optional for an initial operating permit)
Spacing Between Plates	Enter the spacing between plates, in inches, only when the scrubber type entered is "Tray Tower". (optional for an initial operating permit)
Maximum Inlet Temp.	Enter the maximum operating temperature of the inlet gas in deg. F.
Maximum Outlet Temp.	Enter the maximum operating temperature of the outlet gas in deg. F.
Inlet Grain Loading	Enter the inlet particle grain loading in gr./dscf. only when the scrubber is used for particulate control. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	If the scrubber is used for particulate control, enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Scrubber, (Packed Tower) (AIMS-CD-017)

Instructions for filling out the Packed Tower Scrubber Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Particulate Control?	Enter “yes” if the scrubber is used for particulate control. Otherwise, enter “no.” (optional for an initial operating permit)
Gas Control?	Enter “yes” if the scrubber is used for gas control. Otherwise, enter “no.” (optional for an initial operating permit)
Mist Eliminator?	Enter “yes” if the scrubber is equipped with a mist eliminator. Otherwise, enter “no.” (optional for an initial operating permit)
Min. Discharge Pressure	Enter the minimum pump discharge pressure in inches of water. (optional for an initial operating permit)
Max. Discharge Pressure	Enter the maximum pump discharge pressure in inches of water. (optional for an initial operating permit)
Monitoring Pressure	Enter the method of monitoring pump discharge pressure. (optional for an initial operating permit)
Minimum Pump Current	Enter the minimum pump current in amps. (optional for an initial operating permit)
Maximum Pump Current	Enter the maximum pump current in amps. (optional for an initial operating permit)
Monitoring Current	Enter the method of monitoring pump discharge current in amps. (optional for an initial operating permit)
Minimum Inlet Pressure	Enter the minimum scrubber medium inlet pressure in inches of water. (optional for an initial operating permit)
Min. Liquid Flow Rate	Enter the minimum operating liquid flow rate in gpm.
Max. Liquid Flow Rate	Enter the maximum operating liquid flow rate in gpm.
Monitoring Liquid Flow Rate	Enter the method of monitoring the liquid flow rate.
Minimum Gas Flow Rate	Enter the minimum operating gas flow rate in gpm.
Maximum Gas Flow Rate	Enter the maximum operating gas flow rate in gpm.
Monitoring Gas Flow Rate	Enter the method of monitoring the gas flow rate.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water. (optional for an initial operating permit)
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water. (optional for an initial operating permit)

Monitoring Pressure Drop	Enter the method of monitoring the pressure drop. (optional for an initial operating permit)
Direction of Gas-Liquid Flow	Enter the relative direction of the gas-liquid flow from one of the following directions: Co-Current, Counter-Current, Cross Current, or Other. If other, describe the direction.
Height of Packed Section	Enter the height of the packed section in feet.
Type of Material	Enter the type of packing material used. (optional for an initial operating permit)
Size of Material	Enter the size of packing material used. (optional for an initial operating permit)
Tower Diameter	Enter the tower diameter in feet. (optional for an initial operating permit)
Total Tower Height	Enter the total tower height in feet.
Maximum Inlet Temp.	Enter the maximum operating temperature of the inlet gas in deg. F.
Maximum Exhaust Temp.	Enter the maximum operating temperature of the exhaust gas in deg. F.
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	Enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Scrubber, (Venturi) (AIMS-CD-018)

Instructions for filling out the Scrubber (Venturi) Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Particulate Control?	Enter "yes" if the scrubber is used for particulate control. Otherwise, enter "no." (optional for an initial operating permit)
Gas Control?	Enter "yes" if the scrubber is used for gas control. Otherwise, enter "no." (optional for an initial operating permit)
Mist Eliminator?	Enter "yes" if the scrubber is equipped with a mist eliminator. Otherwise, enter "no." (optional for an initial operating permit)
Min. Discharge Pressure	Enter the minimum pump discharge pressure in inches of water. (optional for an initial operating permit)
Max. Discharge Pressure	Enter the maximum pump discharge pressure in inches of water. (optional for an initial operating permit)
Monitoring Pressure	Enter the method of monitoring pump discharge pressure. (optional for an initial operating permit)
Minimum Pump Current	Enter the minimum pump current in amps. (optional for an initial operating permit)
Maximum Pump Current	Enter the maximum pump current in amps. (optional for an initial operating permit)
Monitoring Current	Enter the method of monitoring pump discharge current in amps. (optional for an initial operating permit)
Minimum Inlet Pressure	Enter the minimum scrubber medium inlet pressure in inches of water. (optional for an initial operating permit)
Min. Liquid Flow Rate	Enter the minimum operating liquid flow rate in gpm.
Max. Liquid Flow Rate	Enter the maximum operating liquid flow rate in gpm.
Monitoring Liquid Flow Rate	Enter the method of monitoring the liquid flow rate.
Minimum Gas Flow Rate	Enter the minimum operating gas flow rate in gpm.
Maximum Gas Flow Rate	Enter the maximum operating gas flow rate in gpm.
Monitoring Gas Flow Rate	Enter the method of monitoring the gas flow rate.
Minimum Pressure Drop	Enter the minimum operating pressure drop in inches of water. (optional for an initial operating permit)
Maximum Pressure Drop	Enter the maximum operating pressure drop in inches of water. (optional for an initial operating permit)

Monitoring Pressure Drop	Enter the method of monitoring the pressure drop. (optional for an initial operating permit)
Throat Length	Enter the length of the venturi throat, in inches.
Throat Diameter	Enter the diameter of the venturi throat, in inches.
Liquid Introduction Mechanism	Describe the method utilized to introduce the liquid into the control device. Choose from one of the following: Nozzles, Pipes, or Other. If Other, describe the mechanism.
Type of Nozzle	Enter the type of nozzle used, only if "Nozzle" is entered for Liquid Introduction Mechanism" in the above question.
Maximum Inlet Temp.	Enter the maximum operating temperature of the inlet gas in deg. F.
Maximum Outlet Temp.	Enter the maximum operating temperature of the outlet gas in deg. F.
Inlet Grain Loading	Enter the inlet particle grain loading in gr./dscf. only when the scrubber is used for particulate control. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Particle Size Dist. Analysis?	If the scrubber is used for particulate control, enter "yes" if a particle size distribution analysis is attached. Otherwise, enter "no." (optional for an initial operating permit)
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location of the control device, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Selective Catalytic Reduction (SCR) (AIMS-CD-019)

Instructions for filling out the Selective Catalytic Reduction (SCR) Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Min. Temp. at Catalyst Bed	Enter the minimum temperature at the catalyst bed in deg F.
Max. Temp. at Catalyst Bed	Enter the maximum temperature at the catalyst bed in deg F.
Min. Temp. at Inject. Point	Enter the minimum temperature at the reagent injection point in deg F.
Max. Temp. at Inject. Point	Enter the maximum temperature at the reagent injection point in deg F.
Type of Reagent	Enter the reagent type from one of the following types: Ammonia, Urea, or Other. If Other, describe the type of reagent
Chemical Formula	Enter the chemical formula of the reagent. (optional for an initial operating permit)
Minimum Charge Rate	Enter the minimum charge rate of the reagent in gpm.
Maximum Charge Rate	Enter the maximum charge rate of the reagent in gpm.
Minimum Concentration	Enter the minimum concentration of the reagent in solution in percent volume. (optional for an initial operating permit)
Min. NO_x-to-Reagent Ratio	Enter the minimum NO _x -to-reagent mole ratio.
Max. NO_x-to-Reagent Ratio	Enter the maximum NO _x -to-reagent mole ratio.
Maximum Ammonia Slip	Enter the maximum anticipated ammonia slip in ppm. (optional for an initial operating permit)
Type of Catalyst	Enter the type of catalyst used.
Volume of Catalyst	Enter the volume of the catalyst used in ft ³ . (optional for an initial operating permit)
Form of Catalyst	Enter the form of catalyst used. (optional for an initial operating permit)
Life of Catalyst	Enter the anticipated life of catalyst used. (optional for an initial operating permit)
Units	Enter the units used for the catalyst life from one of the following Units: hours (hrs.), days, or years (yrs.). (optional for an initial operating permit)
Replacement Schedule?	Enter "yes" if a catalyst replacement schedule is attached. Otherwise, enter "no." (optional for an initial operating permit)
Determining Breakthrough	Enter the method of determining breakthrough. (optional for an initial operating permit)

Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter “yes” if data from any recent performance testing are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location of the control device, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Control Device: Selective Non-Catalytic Reduction (SNCR) (AIMS-CD-020)

Instructions for filling out the Selective Non-Catalytic Reduction (SNCR) Control Device Inventory Information Form (details window).

CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Make	Enter the make of the control device. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the control device. (optional for an initial operating permit)
Model	Enter the model of the control device. (optional for an initial operating permit)
Min. Temp. at Inject. Point	Enter the minimum temperature at the reagent injection point in deg F.
Max. Temp. at Inject. Point	Enter the maximum temperature at the reagent injection point in deg F.
Type of Reagent	Enter the reagent type from one of the following types: Ammonia, Urea, or Other.
Description	If "Other" is entered for "Type of Reagent" (see question above), describe the reagent.
Minimum Concentration	Enter the minimum concentration of the reagent in solution in percent volume. (optional for an initial operating permit)
Minimum Reagent Rate	Enter the minimum reagent charge rate in gpm.
Maximum Reagent Rate	Enter the maximum reagent charge rate in gpm.
Max. NO_x-to-Reagent Ratio	Enter the maximum NO _x -to-reagent mole ratio.
Number of Injectors	Enter the number of reagent injectors. (optional for an initial operating permit)
Location of Injectors	Enter the location of reagent injectors. (optional for an initial operating permit)
Injection Method	Enter the reagent injection method. (optional for an initial operating permit)
Maximum Ammonia Slip	Enter the maximum anticipated ammonia slip, in ppm.
Feedback System	Enter a description of the feedback system which controls the amount of reagent charged to the control apparatus. (optional for an initial operating permit)
Maximum Number of Sources	Enter the maximum number of sources using this apparatus as a control device. (Include permitted and non-permitted sources). (optional for an initial operating permit)
Alternative Method	Enter an alternative method to demonstrate the control apparatus is operating properly.
Recent Testing?	Enter "yes" if data from any recent performance testing are attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data (supporting the feasibility and effectiveness of the control device) or specifications are attached. Otherwise, enter "no." (optional for an initial operating permit)

Diagram?

Enter "yes" if a diagram, showing the location of the control device, is attached.
Otherwise, enter "no." (optional for an initial operating permit)

Comments

Enter any comments. (optional for an initial operating permit)

APPENDIX C:

Equipment Inventory Information Form (Details Window) Instructions (Paper Forms)

<u>FORMS</u>	<u>TITLE</u>	<u>PAGE</u>
AIMS-E-001	AIR STRIPPER	1
AIMS-E-002	ASPHALT MANUFACTURING DRYER	2
AIMS-E-003	BAKERY OVEN	3
AIMS-E-004	BOILER	4
AIMS-E-005	COMBUSTION TURBINE	6
AIMS-E-006	DEGREASER (CONVEYORIZED; HEATED (CH))	8
AIMS-E-007	DEGREASER (CONVEYORIZED; UNHEATED (CU))	10
AIMS-E-008	DEGREASER (CONVEYORIZED; VAPOR OR SUPER-HEATED VAPOR (CV))	12
AIMS-E-009	DEGREASER (OPEN TOP; HEATED (OTH))	14
AIMS-E-010	DEGREASER (OPEN TOP; UNHEATED (OTU))	16
AIMS-E-011	DEGREASER (OPEN TOP; VAPOR OR SUPER HEATED VAPOR (OTV))	18
AIMS-E-012	DUCT BURNER	20
AIMS-E-013	DRY CLEANING EQUIPMENT	21
AIMS-E-014	SURFACE COATING DRYER	22
AIMS-E-015	EMERGENCY GENERATOR	23
AIMS-E-016	FUEL COMBUSTION (OTHER EQUIPMENT)	24
AIMS-E-017	GLASS MANUFACTURING FURNACE	25
AIMS-E-018	INCINERATOR	26
AIMS-E-019	MANUFACUTIRNG AND MATERIALS HANDLING EQUIPMENT	28
AIMS-E-020	MUNICIPAL SOLID WASTE LANDFILL	29
AIMS-E-021	OTHER EQUIPMENT	32
AIMS-E-022	PRINTING PRESS (GRAPHIC ARTS)	33
AIMS-E-023	PRINTING PRESS (NEWSPAPER)	35
AIMS-E-024	PROCESS HEATER	36
AIMS-E-025	SOIL VENTING EQUIPMENT	37
AIMS-E-026	SOILD VAPOR EXTRACTION EQUIPMENT – PILOT TEST	38
AIMS-E-027	STATIONARY INTERNAL COMBUSTION ENGINE	39
AIMS-E-028	STERILIZER	41
AIMS-E-029	STORAGE VESSEL	42
AIMS-E-030	SURFACE COATING (FABRIC MATERIAL)	45
AIMS-E-031	SURFACE COATING (NON-FABRIC MATERIAL)	46

Source Equipment: Air Stripper (AIMS-E-001)

Instructions for filling out the Air Stripper Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data or specifications (which may aid in the review of this application) are attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Asphalt Manufacturing Dryer (AIMS-E-002)

Instructions for filling out the Asphalt Manufacturing Dryer Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Maximum Process. Capacity	Enter the maximum processing capacity in lbs./hr. (optional for an initial operating permit)
Process Type	Enter the process type from one of the following types: Drum, Batch, or Other.
Description	If “Other” is entered for “Process Type”, describe the process type.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Bakery Oven (AIMS-E-003)

Instructions for filling out the Bakery Oven source equipment details window .

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Diagram?	Enter "yes" if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data or specifications (which may aid in the review of this application) are attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Include Emission Rates on the Potential to Emit form for each contaminant in ppmvd @ 7% O₂ in addition to lbs/hr and tons/yr.

Source Equipment: Boiler (AIMS-E-004)

Instructions for filling out the Boiler Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Type of Boiler	Choose the Type of Boiler from one of the following: "fire tube," "water tube," "package," or "field erected".
Utility Type	Choose Utility Type from one of the following: "utility" or "non-utility".
Outlet Type	Choose the Outlet Type from one of the following: "steam," "electricity," or "both". (optional for an initial operating permit)
Steam Output	Enter the steam output, in lbs./hr, only when the "Output Type" entered is "steam".
Fuel Firing Method	Choose the Fuel Firing method from one of the following: "tangential," "fluidized bed," "cyclone," "face/wall," or "other". Enter only when the boiler is >10 MMBtu/hr.
Description	Enter only when the Fuel Firing Method entered is "other". (optional for operating permits)
Draft Type	Enter the Draft Type from one of the following: "induced," "forced," or "balanced". Enter only when the boiler is >10 MMBtu/hr.
Type of Heat Exchange	Enter the Type of heat exchanger used from either "direct" or "indirect".
Is the Boiler Using:	Check all below that apply: (optional for an initial operating permit)
Low-NO_x Burn. (LNB)	Check if this applies.
Type of LNB	Enter the type of LNB used only if Low-NO _x Burner (LNB) is checked.
Staged Air Combust.	Check if this applies.
Flue Gas Recir. (FGR)	Check if this applies.
Am't. of Gas Recir.	Enter the amount of Flue Gas Recirculation used, in percent, only if Flue Gas Recirculation (FGR) is checked.
Diagram?	Enter "yes" if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data or specifications (which may aid in the review of this application) are attached. Otherwise, enter "no." (optional for an initial operating permit)

Comments

Enter any comments. (optional for an initial operating permit)

Source Equipment: Combustion Turbine (AIMS-E-005)

Instructions for filling out the Combustion Turbine Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Turbine	Enter the type of turbine. Enter either “aero-derivative” or “industrial”.
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Type of Cycle	Enter the type of cycle from one of the following types: combined-cycle, simple-cycle, regenerative-cycle, or other. If other, describe the type.
Industrial Application	Enter the industrial application from one of the following uses: drive electrical generator, drive compressor, or other. If other, describe the use.
Power Output	Enter the power output for the turbine.
Units	Enter the units for the power output for the turbine from one of the following units: BHP, MW, or other. If other, describe the units.
Is the Turbine Using:	Check all below that apply:
Dry Low-NOx Comb.	Check if this applies.
Steam Injection	Check if this applies.
Steam-to-Fuel Ratio	Enter only if Steam Injection is checked.
Water Injection	Check if this applies.
Water-to-Fuel Ratio	Enter only if Water Injection is checked.
Other	Check if this applies.
Description	Enter only if Other is checked.
Duct Burner	Enter “yes” if the combustion turbine is equipped with a duct burner. Otherwise, enter “no.”
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Degreaser, Conveyorized Heated (CH) (AIMS-E-006)

Instructions for filling out the Conveyorized Heated (CH) Degreaser Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
High Level Liquid Mark?	Enter "yes" if the degreaser is equipped with a visible high level liquid mark. Otherwise, enter "no."
Flushing Wand?	Enter "yes" if the degreaser is equipped with spray nozzles (optional) and/or a flushing wand. Otherwise, enter "no."
Max. Nozzle or Wand Press.	Enter the maximum nozzle or flushing wand pressure, in psi, only when "yes" is selected for the flushing wand.
VOC Droplets or Mist?	Enter only when "yes" is selected for the flushing wand. Enter "yes" if the flushing wand produces any VOC droplets or mist. Otherwise, enter "no." (optional for an initial operating permit)
Agitator Causing Splashing?	Enter "yes" if the degreaser is equipped with an agitator that causes splashing. Otherwise, enter "no."
How Loaded and Unloaded?	Enter how the degreaser is loaded and unloaded.
Thermostat?	Enter "yes" if the degreaser is equipped with a thermostat to maintain VOC temperature below the boiling point. Otherwise, enter "no."
Solution Type	Enter the degreasing solution type from one of the following types: Solvent Based, Aqueous Based, Vapor Phase, or Other. If Other describe the solution type. (optional for an initial operating permit)
Chem. Name of Solution	Enter the chemical name of the solution. (optional for an initial operating permit)
Maximum Temperature	Enter the maximum temperature of the cleaning solution in deg. F.
Boiling Point	Enter the maximum boiling point of the cleaning solution in deg. F.
MSDS for Solution?	Enter "yes" if a material safety data sheet (MSDS) for the cleaning solution is attached. Otherwise, enter "no." (optional for an initial operating permit)
Local Exhaust Systems?	Enter "yes" if there are local exhaust systems located within 36 inches of the degreaser's emission point. Otherwise, enter "no." (optional for an initial operating permit)
Positive Pressure Sources?	Enter "yes" if there are positive pressure sources located within 20 feet of the degreaser's tank rim. Otherwise, enter "no." (optional for an initial operating permit)
Cover?	Enter "yes" if the degreaser is equipped with a cover, over the conveyor inlet and outlet ports and/or other openings, to protect the cleaner from drafts. Otherwise, enter "no."

Silhouette Cutouts?	Enter “yes” if the degreaser is equipped with silhouette cutouts or hanging flaps, which minimize the effective opening at the conveyor inlet and outlet ports, to protect the cleaner from drafts. Otherwise, enter “no.”
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Degreaser, Conveyorized Unheated (CU) (AIMS-E-007)

Instructions for filling out the Conveyorized Unheated (CU) Degreaser Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
High Level Liquid Mark?	Enter “yes” if the degreaser is equipped with a visible high level liquid mark. Otherwise, enter “no.”
Flushing Wand?	Enter “yes” if the degreaser is equipped with spray nozzles (optional) and/or a flushing wand. Otherwise, enter “no.”
Max. Nozzle or Wand Press.	Enter the maximum nozzle or flushing wand pressure, in psi, only when “yes” is selected for the flushing wand.
VOC Droplets or Mist?	Enter only when “yes” is selected for the flushing wand. Enter “yes” if the flushing wand produces any VOC droplets or mist. Otherwise, enter “no.” (optional for an initial operating permit)
Agitator Causing Splashing?	Enter “yes” from the drop-down list if the degreaser is equipped with an agitator that causes splashing. Otherwise, enter “no.”
How Loaded and Unloaded?	Enter how the degreaser is loaded and unloaded.
Solution Type	Enter the degreasing solution type from one of the following types: Solvent based, Aqueous based, Vapor Phase, or Other. If Other, describe the solution type. (optional for an initial operating permit)
Chem. Name of Solution	Enter the chemical name of the solution. (optional for an initial operating permit)
Maximum Temperature	Enter the maximum temperature of the cleaning solution in deg. F.
Boiling Point	Enter the maximum boiling point of the cleaning solution in deg. F.
MSDS for Solution?	Enter “yes” if a material safety data sheet (MSDS) for the cleaning solution is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Cover?	Enter “yes” if the degreaser is equipped with a cover, over the conveyor inlet and outlet ports and/or other openings, to protect the cleaner from drafts. Otherwise, enter “no.”
Silhouette Cutouts?	Enter “yes” if the degreaser is equipped with silhouette cutouts or hanging flaps, which minimize the effective opening at the conveyor inlet and outlet ports, to protect the cleaner from drafts. Otherwise, enter “no.”
Local Exhaust Systems?	Enter “yes” if there are local exhaust systems located within 36 inches of the degreaser’s emission point. Otherwise, enter “no.” (optional for an initial operating permit)
Positive Pressure Sources?	Enter “yes” if there are positive pressure sources located within 20 feet of the degreaser’s tank rim. Otherwise, enter “no.” (optional for an initial operating permit)

Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Degreaser, Conveyorized Vapor (CV) (AIMS-E-008)

Instructions for filling out the Conveyorized Vapor (CV) Degreaser Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for operating permits)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
High Level Liquid Mark?	Enter "yes" if the degreaser is equipped with a visible high level liquid mark. Otherwise, enter "no."
High Level Vapor Mark?	Enter "yes" if the degreaser is equipped with a visible high level vapor mark. Otherwise, enter "no."
Flushing Wand?	Enter "yes" if the degreaser is equipped with spray nozzles (optional) and/or a flushing wand. Otherwise, enter "no."
Max. Nozzle or Wand Press.	Enter the maximum nozzle or flushing wand pressure, in psi, only when "yes" is selected for the flushing wand.
VOC Droplets or Mist?	Enter only when "yes" is selected for the flushing wand. Enter "yes" if the flushing wand produces any VOC droplets or mist. Otherwise, enter "no." (optional for an initial operating permit)
Agitator Causing Splashing?	Enter "yes" if the degreaser is equipped with an agitator that causes splashing. Otherwise, enter "no."
How Loaded and Unloaded?	Enter how the degreaser is loaded and unloaded.
Solution Type	Enter the degreasing solution type from one of the following types: Solvent Based, Aqueous Based, Vapor Phase, or Other. If Other, describe the solution type. (optional for an initial operating permit)
Chem. Name of Solution	Enter the chemical name of the solution. (optional for an initial operating permit)
MSDS for Solution?	Enter "yes" if a material safety data sheet (MSDS) for the cleaning solution is attached. Otherwise, enter "no." (optional for an initial operating permit)
Local Exhaust Systems?	Enter "yes" if there are local exhaust systems located within 36 inches of the degreaser's emission point. Otherwise, enter "no." (optional for an initial operating permit)
Positive Pressure Sources?	Enter "yes" if there are positive pressure sources located within 20 feet of the degreaser's tank rim. Otherwise, enter "no." (optional for an initial operating permit)
Maximum Heat Rate	Enter the maximum heat input rate into the liquid bath in Btu/hr. (optional for an initial operating permit)
Freeboard Chiller?	Enter "yes" if the degreaser is equipped with a freeboard chiller. Otherwise, enter "no."
Chiller Coolant	Enter the coolant used in the chiller only when "yes" is selected for freeboard chiller.

Maximum Temperature	Enter the maximum temperature of the cooling fluid in the chiller, in deg. F, only when “yes” is selected for freeboard chiller.
Vapor Zone Temperature	Enter the temperature in the superheated vapor zone in deg. F.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Degreaser, Open Top Heated (OTH) (AIMS-E-009)

Instructions for filling out the Open Top Heated (OTH) Degreaser Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
High Level Liquid Mark?	Enter "yes" if the degreaser is equipped with a visible high level liquid mark. Otherwise, enter "no."
Flushing Wand?	Enter "yes" if the degreaser is equipped with spray nozzles (optional) and/or a flushing wand. Otherwise, enter "no."
Max. Nozzle or Wand Press.	Enter the maximum nozzle or flushing wand pressure, in psi, only when "yes" is selected for the flushing wand.
VOC Droplets or Mist?	Enter only when "yes" is selected for the flushing wand. Enter "yes" if the flushing wand produces any VOC droplets or mist. Otherwise, enter "no." (optional for an initial operating permit)
Agitator Causing Splashing?	Enter "yes" if the degreaser is equipped with an agitator that causes splashing. Otherwise, enter "no."
How Loaded and Unloaded?	Enter how the degreaser is loaded and unloaded.
Cover?	Enter "yes" if the degreaser is equipped with a cover to prevent the vapors from diffusing while not in use. Otherwise, enter "no."
Type of Cover	Enter the type of cover only when "yes" is selected for the cover.
Freeboard Height	Enter the freeboard height in feet. (optional for an initial operating permit)
Freeboard Ratio	Enter the freeboard ratio.
Length of Top Opening	Enter the length of the top opening in feet. (optional for an initial operating permit)
Width of Top Opening	Enter the width of the top opening in feet. (optional for an initial operating permit)
Area of Top Opening	Enter the area of the top opening in ft ² .
Thermostat?	Enter "yes" if the degreaser is equipped with a thermostat to maintain the VOC temperature below the boiling point. Otherwise, enter "no."
Solution Type	Enter the degreasing solution type from one of the following types: Solvent Based, Aqueous Based, Vapor Phase, or other. If other, describe the solution type. (optional for an initial operating permit)
Chem. Name of Solution	Enter the chemical name of the solution. (optional for an initial operating permit)
Maximum Temperature	Enter the maximum temperature of the cleaning solution in deg. F.
Boiling Point	Enter the maximum boiling point of the cleaning solution in deg. F.

MSDS for Solution?	Enter “yes” if a material safety data sheet (MSDS) for the cleaning solution is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Local Exhaust Systems?	Enter “yes” if there are local exhaust systems located within 36 inches of the degreaser’s emission point. Otherwise, enter “no.” (optional for an initial operating permit)
Positive Pressure Sources?	Enter “yes” if there are positive pressure sources located within 20 feet of the degreaser’s tank rim. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Degreaser, Open Top Unheated (OTU) (AIMS-E-010)

Instructions for filling out the Open Top Unheated (OTU) Degreaser Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
High Level Liquid Mark?	Enter “yes” if the degreaser is equipped with a visible high level liquid mark. Otherwise, enter “no.”
Flushing Wand?	Enter “yes” if the degreaser is equipped with spray nozzles (optional) and/or a flushing wand. Otherwise, enter “no.”
Max. Nozzle or Wand Press.	Enter the maximum nozzle or flushing wand pressure, in psi, only when “yes” is selected for the flushing wand.
VOC Droplets or Mist?	Enter only when “yes” is selected for the flushing wand. Enter “yes” if the flushing wand produces any VOC droplets or mist. Otherwise, enter “no.” (optional for an initial operating permit)
Agitator Causing Splashing?	Enter “yes” if the degreaser is equipped with an agitator that causes splashing. Otherwise, enter “no.”
How Loaded and Unloaded?	Enter how the degreaser is loaded and unloaded.
Drain Rack?	Enter “yes” if the degreaser is equipped with a drain rack. Otherwise, enter “no.”
Cover?	Enter “yes” if the degreaser is equipped with a cover to prevent the vapors from diffusing while not in use. Otherwise, enter “no.”
Type of Cover	Enter the type of cover only when “yes” is selected for the cover.
Freeboard Height	Enter the freeboard height in feet. (optional for an initial operating permit)
Freeboard Ratio	Enter the freeboard ratio.
Length of Top Opening	Enter the length of the top opening in feet. (optional for an initial operating permit)
Width of Top Opening	Enter the width of the top opening in feet. (optional for an initial operating permit)
Area of Top Opening	Enter the area of the top opening in ft ² .
Solution Type	Enter the degreasing solution type from one of the following types: Solvent Based, Aqueous Based, Vapor Phase, or Other. If other, describe the solution type. (optional for an initial operating permit)
Chem. Name of Solution	Enter the chemical name of the solution. (optional for an initial operating permit)
MSDS for Solution?	Enter “yes” if a material safety data sheet (MSDS) for the cleaning solution is attached. Otherwise, enter “no.” (optional for an initial operating permit)

Local Exhaust Systems?	Enter “yes” if there are local exhaust systems located within 36 inches of the degreaser’s emission point. Otherwise, enter “no.” (optional for an initial operating permit)
Positive Pressure Sources?	Enter “yes” if there are positive pressure sources located within 20 feet of the degreaser’s tank rim. Otherwise, enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Degreaser, Open Top Vapor (OTV) (AIMS-E-011)

Instructions for filling out the Open Top Vapor (OTV) Degreaser Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
High Level Liquid Mark?	Enter "yes" if the degreaser is equipped with a visible high level liquid mark. Otherwise, enter "no."
High Level Vapor Mark?	Enter "yes" if the degreaser is equipped with a visible high level vapor mark. Otherwise, enter "no."
Flushing Wand?	Enter "yes" if the degreaser is equipped with spray nozzles (optional) and/or a flushing wand. Otherwise, enter "no."
Max. Nozzle or Wand Press.	Enter the maximum nozzle or flushing wand pressure, in psi, only when "yes" is selected for the flushing wand.
VOC Droplets or Mist?	Enter only when "yes" is selected for the flushing wand. Enter "yes" if the flushing wand produces any VOC droplets or mist. Otherwise, enter "no." (optional for an initial operating permit)
Agitator Causing Splashing?	Enter "yes" if the degreaser is equipped with an agitator that causes splashing. Otherwise, enter "no."
How Loaded and Unloaded?	Enter how the degreaser is loaded and unloaded.
Drain Rack?	Enter "yes" if the degreaser is equipped with a drain rack. Otherwise, enter "no."
Freeboard Height	Enter the freeboard height in feet. (optional for an initial operating permit)
Freeboard Ratio	Enter the freeboard ratio.
Length of Top Opening	Enter the length of the top opening in feet. (optional for an initial operating permit)
Width of Top Opening	Enter the width of the top opening in feet. (optional for an initial operating permit)
Area of Top Opening	Enter the area of the top opening in ft ² .
Solution Type	Enter the degreasing solution type from one of the following types: Solvent based, Aqueous Based, Vapor Phase, or Other. If Other, describe the solution type. (optional for an initial operating permit)
Chem. Name of Solution	Enter the chemical name of the solution. (optional for an initial operating permit)
MSDS for Solution?	Enter "yes" if a material safety data sheet (MSDS) for the cleaning solution is attached. Otherwise, enter "no." (optional for an initial operating permit)

Local Exhaust Systems?	Enter “yes” if there are local exhaust systems located within 36 inches of the degreaser’s emission point. Otherwise, enter “no.” (optional for an initial operating permit)
Positive Pressure Sources?	Enter “yes” if there are positive pressure sources located within 20 feet of the degreaser’s tank rim. Otherwise, enter “no.” (optional for an initial operating permit)
Maximum Heat Rate	Enter the maximum heat input rate into the liquid bath in Btu/hr. (optional for an initial operating permit)
Freeboard Chiller?	Enter “yes” if the degreaser is equipped with freeboard chiller. Otherwise, Enter “no.”
Chiller Coolant	Enter the coolant used in the chiller only when “yes” is selected for freeboard chiller.
Maximum Temperature	Enter the maximum temperature of the cooling fluid in the chiller, in deg. F, only when “yes” is selected for freeboard chiller.
Vapor Zone Temperature	Enter the temperature in the superheated vapor zone in deg. F.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Duct Burner (AIMS-E-012)

Instructions for filling out the Duct Burner Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Duct Burner	Enter the type of duct burner.
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Diagram?	Enter "yes" if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Include Emission Rates on the Potential to Emit form for each contaminant in ppmvd @ 7% O₂ in addition to lbs/hr and tons/yr.

Source Equipment: Dry Cleaning Equipment (AIMS-E-013)

Instructions for filling out the Dry Cleaning Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Dry Cleaner	Enter the type of dry cleaning equipment from one of the following types: dry to dry, stackless refrigeration heat pump dry to dry, or other. If other, describe the type.
Describe	Describe the equipment type only if “Other” is entered for the “Dry Cleaning Equipment Type”.
Generation of Equipment	Enter the generation of the equipment (1st., 2nd., 3rd., etc...).
Load Capacity	Enter the load capacity in pounds.
Type of Controls	Enter the type of air pollution controls from one of the following types: refrigeration, carbon adsorption, or other. If other, describe the control type.
Describe	Describe the type of control used only if “Other” is entered for “Air Pollution Control Type”.
Solvent Chemical	Enter the chemical name of the dry cleaning solvent used.
Maximum Solvent Used	Enter the maximum dry cleaning solvent used per year in gallons.
Cycle Time	Enter the cycle time of the equipment in hours per batch.
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Surface Coating Dryer (AIMS-E-014)

Instructions for filling out the Surface Coating Dryer Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Dryer Type	Enter either “combustion” or “electric”.
Heating Method	Enter the type heating method from one of the following methods: steam, open flame, electric, or other. If other, describe the method. (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Maximum Sulfur Content	Enter the maximum sulfur content in the fuel in percent. Enter only when the dryer type entered is “combustion”.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Emergency Generator (AIMS-E-015)

Instructions for filling out the Emergency Generator Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Over 500 Hours per Year?	Enter “yes” if the equipment will be used in excess of 500 hours per year. Otherwise, Enter “no.” (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Fuel Combustion (Other Equipment) (AIMS-E-016)

Instructions for filling out the Fuel Combustion (Other Equipment) Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Description	Enter a description of the fuel combustion equipment.
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Type of Heat Exchange	Enter either “direct” or “indirect”.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Include Emission Rates on the Potential to Emit form for each contaminant in ppmvd @ 7% O₂ in addition to lbs/hr and tons/yr.

Source Equipment: Glass Manufacturing Furnace (AIMS-E-017)

Instructions for filling out the Glass Manufacturing Furnace Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Type of Heat Exchange	Enter either “direct” or “indirect” from the drop-down list.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Incinerator (AIMS-E-018)

Instructions for filling out the Incinerator Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Incinerator	Enter the type of incinerator from one of the following choices: rotary kiln, or other. If other, describe the type. (optional for an initial operating permit)
Description	Describe the type of incinerator only if "Other" is entered for "Unit Type".
Waste Category	Enter the waste category from one of the following choices: MSW, RMW, HW, or other. If other, describe the waste category.
Description	Describe the waste category only if "Other" is entered for "Waste Type".
Max. Processing Capacity	Enter the maximum waste processing capacity. (optional for an initial operating permit)
Units	Enter the units for the waste processing capacity of the incinerator from one of the following units: tons/hr, lbs./hr, dry ton of sludge/hr. or other. If other, describe the units. (optional for an initial operating permit)
State of Waste	Enter the physical state of the waste being incinerated from one of the following states: solid, liquid, sludge, or other. If other, describe the state of the waste. (optional for an initial operating permit)
Prim. Cham. Max. Heat Input	Enter the primary chamber maximum rated gross heat input from fuel in MMBtu/hr, HHV.
Prim. Cham. Max. Prim. Air	Enter the primary chamber maximum primary air in acfm. (optional for an initial operating permit)
Prim. Cham. Max. Flow Rate	Enter the primary chamber maximum gas flow rate in acfm. (optional for an initial operating permit)
Primary Chamber Volume	Enter the primary chamber volume in ft ³ . (optional for an initial operating permit)
Prim. Cham. Min. Temp.	Enter the primary chamber minimum design operation temperature in deg. F. (optional for an initial operating permit)
Prim. Cham. Min. Res. Time	Enter the primary chamber minimum gas residence time in seconds. (optional for an initial operating permit)
Sec. Cham. Max. Heat Input	Enter the secondary chamber maximum rated gross heat input from fuel in MMBtu/hr, HHV.
Sec. Cham. Max. Prim. Air	Enter the secondary chamber maximum secondary air in acfm. (optional for an initial operating permit)
Sec. Cham. Max. Flow Rate	Enter the secondary chamber maximum gas flow rate in acfm. (optional for an initial operating permit)

Secondary Chamber Volume	Enter the secondary chamber volume in ft ³ . (optional for an initial operating permit)
Sec. Cham. Min. Temp.	Enter the secondary chamber minimum design operation temperature in deg. F.
Sec. Cham. Min. Res. Time	Enter the secondary chamber minimum gas residence time in seconds. (optional for an initial operating permit)
Sec. Cham. Max. Outlet Air	Enter the secondary chamber maximum outlet air flow rate in acfm. (optional for an initial operating permit)
Sec. Cham. Min. Out. Temp.	Enter the secondary chamber minimum design outlet temperature in deg. F.
Plume Suppression	Enter the type of plume suppression.
Bypass Stack?	Enter “yes” if a bypass stack is included. Otherwise, Enter “no.”
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)
Include Emission Rates on the Potential to Emit form for each contaminant in ppmvd @ 7% O₂ in addition to lbs/hr and tons/yr.	

Source Equipment: Manufacturing and Materials Handling Equipment (AIMS-E-019)

Instructions for filling out the Manufacturing and Materials Handling Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Equipment Type	Enter the type of manufacturing and materials handling equipment utilized.
Capacity	Enter the capacity of the equipment. (optional for an initial operating permit)
Units	Enter the units from one of the following types: gallons, feet ³ , or other. (optional for an initial operating permit)
Description	Describe the units only when the units for the capacity entered is “other”. (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Municipal Solid Waste Landfill (AIMS-E-020)

Instructions for filling out the Municipal Solid Waste Landfill Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Facility Permit Number	Enter the solid waste facility permit number. (optional for an initial operating permit)
Year Opened	Enter the year landfill opened. (optional for an initial operating permit)
Issuance Date	Enter the solid waste facility permit issuance date. (optional for an initial operating permit)
Expected Year of Closure	Enter the expected year of closure.
Actual Year of Closure	Enter the actual year of closure.
Total Design Area	Enter the total design area in acres.
Total Design Capacity	Enter the total design capacity in megagrams. (optional for an initial operating permit)
Active Area	Enter the total design area in acres.
Capped Area	Enter the total capped area in acres.
Landfill Lined?	Enter "yes" if the landfill is lined. Otherwise, Enter "no." (optional for an initial operating permit)
Hazardous Waste?	Enter "yes" if the site was used for the disposal of hazardous waste. Otherwise, Enter "no." (optional for an initial operating permit)
Indust./Commer. Waste?	Enter "yes" if there was ever co-disposal of industrial waste or reason to believe that the waste stream into the landfill contained large amounts of industrial waste or volatile compounds from commercial sources. Otherwise, Enter "no." (optional for an initial operating permit)
Max. Landfill Gas Rate	Enter the maximum estimated landfill gas generation rate during the life of the landfill in ft ³ /yr.
Model Used	Enter the model used to estimate the landfill gas production. (optional for an initial operating permit)
Pretreatment System?	Enter "yes" if there is a landfill gas pretreatment system. Otherwise, Enter "no."
Method of Pretreatment	Enter the method of landfill gas pretreatment only when "yes" is entered for pretreatment system. (optional for an initial operating permit)
Design Collection Capacity	Enter the design capacity of the landfill gas collection system in acfm.
Collection Efficiency	Enter the overall collection efficiency in percent.
Mover/Blower Size	Enter the landfill gas mover or blower size in horsepower.
Number of Extraction Wells	Enter the number of extraction wells. (optional for an initial operating permit)
Well Diameter	Enter the extraction well diameter in feet. (optional for an initial operating permit)

Well Depth Enter the extraction well depth in feet. (optional for an initial operating permit)

Well Overlap Enter the extraction well overlap in percent. (optional for an initial operating permit)

Well Operating Vacuum Enter the extraction well operating vacuum in inches of water. (optional for an initial operating permit)

Landfill Gas

Landfill Gas Analysis? Enter “yes” if an actual landfill gas analysis is attached. Otherwise, Enter “no.” (optional for an initial operating permit)

Deposition History? Enter “yes” if a waste deposition history, providing the tons deposited for each operating year, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)

Layout? Enter “yes” if a layout (plan view) of the wells and the header piping is attached. Otherwise, Enter “no.” (optional for an initial operating permit)

Comments Enter any comments. (optional for an initial operating permit)

Tab: Landfill Gas Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Landfill Gas”. Enter ppmvd or wt. % in the Units column, depending upon the concentration level.

LANDFILL GAS COMPOSITION TABLE		
Pollutant	Concentration	Units
Amines		
Chlorides		
CO ₂		
H ₂ S		
Mercaptans		
Mercury		
Methane		
Non-Methane Hydrocarbons		

Source Equipment: Other Equipment (AIMS-E-021)

Instructions for filling out the Other Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Equipment Type	Enter the type of equipment utilized.
Capacity	Enter the capacity of the equipment. (optional for an initial operating permit)
Units	Enter the units for the capacity of the equipment from one of the following units: gallons, or other. If other, describe the units. (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Printing Press (Graphic Arts) (AIMS-E-022)

Instructions for filling out the Graphic Arts Printing Press Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Press	Enter the type of printing press.
Fountain Solution?	Enter "yes" if the press uses a fountain solution. Otherwise, Enter "no." (optional for an initial operating permit)
Max. Cons. of Fount. Sol'n. (yr.)	Enter the maximum annual consumption of the fountain solution, in gal/yr., only when "yes" is selected for the use of a fountain solution.
Dens. of VOC in Fount. Sol'n.	Enter the density of volatile organic compounds (VOC) in the fountain solution, in lbs./gal, only when "yes" is selected for the use of a fountain solution.
Max. VOC in Fount. Sol'n.	Enter the maximum portion of volatile organic compounds (VOC) as applied in the fountain solution, in percent, only when "yes" is selected for the use of a fountain solution.
Max. Water in Fount. Sol'n.	Enter the maximum portion of water in the fountain solution, in percent, only when "yes" is selected for the use of a fountain solution.
Max. Temp. of Fount. Sol'n.	Enter the maximum temperature of the fountain solution, in deg. F, only when "yes" is selected for the use of a fountain solution. (optional for an initial operating permit)
Cleaning Solution	Enter the solution used for cleaning the press. (optional for an initial operating permit)
Max. Clean. Sol'n. Used (hr.)	Enter the maximum cleaning solution used in any one hour, in gal/hr.
Max. Clean. Sol'n. Used (yr.)	Enter the maximum cleaning solution used in a year, in gal/yr.
Dens. of VOC in Clean. Sol'n.	Enter the density of the volatile organic compounds (VOC) in the cleaning solution, in lbs./gal.
MSDS?	Enter "yes" if a material safety data sheet (MSDS), for the fountain and cleaning solutions, is attached. Otherwise, Enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Printing Press (Newspaper) (AIMS-E-023)

Instructions for filling out the Newspaper Printing Press Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Press	Enter the type of printing press.
Fountain Solution?	Enter “yes” if the press uses a fountain solution. Otherwise, Enter “no.” (optional for an initial operating permit)
Max. Cons. of Fount. Sol’n. (yr.)	Enter the maximum annual consumption of the fountain solution, in gal./yr., only when “yes” is selected for the use of a fountain solution.
Dens. of VOC in Fount. Sol’n.	Enter the density of volatile organic compounds (VOC) in the fountain solution, in lbs./gal, only when “yes” is selected for the use of a fountain solution.
Max. VOC in Fount. Sol’n.	Enter the maximum portion of volatile organic compounds (VOC) as applied in the fountain solution, in percent, only when “yes” is selected for the use of a fountain solution.
Max. Water in Fount. Sol’n.	Enter the maximum portion of water in the fountain solution, in percent, only when “yes” is selected for the use of a fountain solution.
Max. Temp. of Fount. Sol’n.	Enter the maximum temperature of the fountain solution, in deg. F, only when “yes” is selected for the use of a fountain solution. (optional for an initial operating permit)
Cleaning Solution	Enter the solution used for cleaning the press. (optional for an initial operating permit)
Max. Clean. Sol’n. Used (hr.)	Enter the maximum cleaning solution used in any one hour, in gal/hr.
Max. Clean. Sol’n. Used (yr.)	Enter the maximum cleaning solution used in a year, in gal/yr.
Dens. of VOC in Clean. Sol’n.	Enter the density of the volatile organic compounds (VOC) in the cleaning solution, in lbs./gal.
MSDS?	Enter “yes” if a material safety data sheet (MSDS), for the fountain and cleaning solutions, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Process Heater (AIMS-E-024)

Instructions for filling out the Process Heater Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Equipment Type Description	Enter a description of the equipment type.
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Draft Type	Enter the draft type from one of the following types: natural draft, mechanical draft-forced, mechanical draft-induced, mechanical draft-balanced, or other. If other, describe the draft type. (optional for an initial operating permit)
Firing Method	Enter either "direct" or "indirect".
Is the Process Heater Using: Check all below that apply: (optional for an initial operating permit)	
Low-NO_x Burn. (LNB)	Check if this applies. (optional for an initial operating permit)
Type of LNB	Enter only if Low-NO _x Burner is checked. (optional for an initial operating permit)
Flue Gas Recir. (FGR)	Check if this applies. (optional for an initial operating permit)
Diagram?	Enter "yes" if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter "no." (optional for an initial operating permit)
Manufacturer's Information?	Enter "yes" if manufacturer's data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter "no." (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Include Emission Rates on the Potential to Emit form for each contaminant in ppmvd @ 7% O₂ in addition to lbs/hr and tons/yr.

Source Equipment: Soil Venting Equipment (AIMS-E-025)

Instructions for filling out the Soil Venting Equipment Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Venting Equipment	Enter the type of soil venting equipment. (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Soil Vapor Extraction (SVE) – Pilot Test (AIMS-E-026)

Instructions for filling out the Soil Vapor Extractor (SVE) – Pilot Test Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Extractor	Enter the type of soil vapor extractor.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Stationary Internal Combustion (I.C.) Engine (AIMS-E-027)

Instructions for filling out the Internal Combustion (I.C.) Engine Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Maximum Heat Input	Enter the maximum rated gross heat input in MMBtu/hr.
Class	Enter the class of the I.C. engine from one of the following types: lean burn, rich burn or other. If other, describe the class type.
Duty	Enter the duty of the I.C. engine from one of the following choices: base loaded, standby power, peak shaving, load following, or other. If other, describe the duty. (optional for an initial operating permit)
Description	Describe the duty only if “other” is entered for “Duty”.
Load Range	Enter the load range, in percent, only when the duty of the I.C. engine entered is “peak shaving” or “load following”. (optional for an initial operating permit).
Stroke	Enter either “2-stroke” or “4-stroke”. (optional for an initial operating permit)
Power Output	Enter the power output in brake horsepower. (optional for an initial operating permit)
Electrical Output	Enter the electrical output in kilowatt-hours. (optional for an initial operating permit)
Compression Ratio	Enter the compression ratio of the engine. (optional for an initial operating permit)
Ignition Type	Enter the ignition type for the I.C. engine from one of the following types: spark, compression, or other. If other, describe the ignition type. (optional for an initial operating permit)
Engine Speed	Enter the engine speed in revolutions per minute. (optional for an initial operating permit)
Engine Exhaust Temp.	Enter the engine exhaust temperature in deg. F. (optional for an initial operating permit)
Air-to-Fuel Ratio	Enter the air-to-fuel ratio at peak load. (optional for an initial operating permit)
Lambda Factor	Enter the lambda factor in scfm/scfm. (optional for an initial operating permit)
Fuel Consumption	Enter the brake-specific fuel consumption at peak load in Btu/BHP-hr. (optional for an initial operating permit)
Output Type	Enter the output type for the I.C. engine from one of the following types: electric, cogeneration, or other. If other, describe the type. (optional for an initial operating permit)
Heat-to-Power Ratio	Enter only when the output type of the I.C. engine entered is “cogene-ration”. (optional for an initial operating permit)

Turbocharger?	Enter “yes” if a turbocharger is used. Otherwise, Enter “no.” (optional for an initial operating permit)
Aftercooler?	Enter “yes” if a aftercooler is used. Otherwise, Enter “no.” (optional for an initial operating permit)
Is the Engine Using:	Check all below that apply:
Prestrat. Charge (PSC)	Check if this applies.
NO_x Converter	Check if this applies.
Air-to-Fuel Adj. (AF)	Check if this applies.
Ignit. Timing Retard	Check if this applies.
Low-Emiss. Combust.	Check if this applies.
Non-Select. Catal. Red. (NSCR)	Check if this applies.
Other	Check if this applies.
Description	Enter only if Other is checked.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)
Include Emission Rates on the Potential to Emit form for each contaminant in ppmvd @ 7% O₂ in addition to lbs/hr and tons/yr.	

Source Equipment: Sterilizer (AIMS-E-028)

Instructions for filling out the Sterilizer Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Type of Sterilizer	Enter the type of sterilizer.
Max. Ethylene Oxide Use	Enter the maximum ethylene oxide use in tons per year. (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Storage Vessel (AIMS-E-029)

Instructions for filling out the Storage Vessel Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Type of Contents	Enter the type of content stored in the vessel from one of the following: Both Liquids and Solids, Liquids only, or Solids only.
Storage Vessel Type	Choose the type of storage vessel, from the drop-down list, from one of the following choices: Bin, Bunker, Hopper, Reservoir Silo, or Tank.
Design Capacity	Enter the design capacity of the storage vessel.
Units	Enter the units of the vessel capacity from one of the following: gallons, feet ³ , pounds, or tons.
Storage Vessel Location	Enter the storage vessel location, from one of the following choices: above ground, or below ground.
Exposed to Sunlight?	Enter “yes”, if the storage vessel is exposed to sunlight. Otherwise, enter “no.”
Color of Tank	Choose the color of the tank, from one of the following choices: Diffuse Aluminum, Gray (light), Gray (medium), Other, Red Primer, Specular Aluminum, or White.
Description	Enter the description of the color only when the Color of Tank entered is “Other.”
Shell Condition	Enter the condition of the shell from one of the following choices: Dense Rust, Guniting Lining, or Light Rust.
Paint Condition	Enter the condition of the paint on the vessel from one of the following choices: Good, or Poor.
Shell Construction	Enter the method of construction of the shell from one of the following choices: Bolted/Riveted, or Welded.
Insulated?	Enter “yes” if the storage vessel is insulated. Otherwise, enter “no.”
Type of Insulation	Enter the type of insulation installed on the storage vessel.
Thickness of Insulation	Enter the thickness of the insulation, in inches.
Thermal Conductivity	Enter the thermal conductivity of the insulation, in [(Btu)(in)/(hr)(ft ²)(deg. F)]
Shape	Enter the shape of the tank from one of the following choices: cylindrical, or rectangular.
Height	Enter the height of the tank, in feet.
Length	Enter the length of the storage tank, in feet.
Width	Enter the width of the storage tank, in feet.
Diameter	Enter the diameter of the storage tank, if the “cylindrical” shape was chosen, in feet.
Other Dimension Description	If the storage tank has another dimension, describe the dimension.
Other Dimension	If the storage tank has another dimension, enter the dimension.

Other Dimension Units	If the storage tank has other dimensions, enter the units of the dimension.
Method of Fill	Enter the method of fill from one of the following choices: Bottom Pipe, Other, Pipe, Submerged, or Top Pipe.
Description	Enter the description of the other method of fill only when the Method of Fill chosen is "other."
Maximum Filling Rate	Enter the maximum filling rate into the storage tank.
Units	Enter the units of the filling rate from one of the following choices: gpm, or ft ³ /min.
Roof or Open Top?	Does the storage vessel have a roof or is it open top? Enter either Open Top or Roof.
Roof Type	Enter the type of roof from one of the following choices: Domed External Floating Roof, Domed Vertical Fixed Roof, External Floating Roof, Horizontal Fixed Roof, Internal Floating Roof, or Vertical Fixed Roof.
Roof Construction	Enter the type of roof construction from one of the following choices: Double Deck, or Pontoon Deck. (optional for an initial operating permit.)
Primary Seal Type	Enter the storage vessel primary seal type from one of the following choices: Mechanical, Liquid Mounted Resilient, or Vapor Mounted Resilient.
Secondary Seal Type	Enter the storage vessel secondary seal type from one of the following choices: None, Shoe mounted, Rim Mounted, or Weather Shield .
Number of Seals	Enter the number of seals on the storage vessel.
Roof Support	If the roof type is Internal floating roof, enter the type of roof support from one of the following choices: column-supported, self-supporting. (optional for an initial operating permit.)
Vapor Return Loop?	Enter "yes" if the storage tank is equipped with a vapor return loop. Otherwise, enter "no."
Conservation Vent?	Enter "yes" if the storage tank is equipped with a conservation vent. Otherwise, enter "no."
Diagram?	Enter "yes" if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, Enter "no."
Manufacturer's Information?	Enter "yes" if manufacturer's data or specifications (which may aid in the review of this application) are attached. Otherwise, Enter "no."
Comments	Enter any comments.

Source Equipment: Surface Coating - Fabric Material (FM) (AIMS-E-030)

Instructions for filling out the Surface Coating - Fabric Material (FM) Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Method of Application	Enter the method of application from one of the following methods: Roller, Screen, Spray, or Other.
Description	Describe the method of application if “Other” is entered for the method of application.
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Source Equipment: Surface Coating - Non-Fabric Material (NFM) (AIMS-E-031)

Instructions for filling out the Surface Coating - Non-Fabric Material (NFM) Equipment Inventory Information Form (details window).

E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Make	Enter the make of the source equipment. (optional for an initial operating permit)
Manufacturer	Enter the manufacturer of the source equipment. (optional for an initial operating permit)
Model	Enter the model of the source equipment. (optional for an initial operating permit)
Method of Application	Enter the method of application from one of the following methods: Roller, Screen, Spray, or Other.
Description	Describe the method of application if “Other” is entered for the method of application.
Spray Type	Enter the spray type, when the “Spray” method of application is entered, from one of the following types: Air-Assisted, Electrostatic, or Other. If Other, describe the type. (optional for an initial operating permit)
Diagram?	Enter “yes” if a diagram, showing the location and/or the configuration of the equipment, is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Manufacturer’s Information?	Enter “yes” if manufacturer’s data or specifications (which may aid in the review of this application) are attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Appendix D:

Control Device Operating Scenario/BPOS Step Information Forms (Details Window) Instructions

<u>FORMS</u>	<u>TITLE</u>	<u>PAGE</u>
AIMS-CDO-001	ALL CONTROLS	1
AIMS-CDO-002	CONDENSER	2
AIMS-CDO-003	OXIDIZER (CATALYTIC)	3
AIMS-CDO-004	OXIDIZER (THERMAL)	4
AIMS-CDO-005	SCRUBBER (MULTI-STAGE)	5
AIMS-CDO-006	SCRUBBER (OTHER, PACKED TOWER, AND VENTURI)	8

Operating Scenario/BPOS Step: All Control Devices (AIMS-CDO-001)

Instructions for filling out the Operating Scenario/BPOS Step (controls) Information page (details window) for: All Control Devices. If a separate information form exists for the control device (AIMS-CDO-002 → AIMS-CDO-006), this form must be attached to the appropriate OS/BPOS Step Control Device Information form.

- U/BP** Enter the Emission Unit or Batch Process NJID (whichever applies) the control device information is connected with.
- OS/BPOS** Enter the Operating Scenario or Batch Process Operating Scenario NJID (whichever applies) the control device information is connected with.
- BPOS Step** Enter the Batch Process Operating Scenario Step NJID the control device information is connected with (if applicable).
- CD** Enter the Control Device NJID of the control device for which the information is being applied to.

Enter the control device removal efficiencies (capture, removal, and overall) for each air contaminant category (or individual HAP or Other emitted above the reporting threshold in Sub. 8 or 22) involved in the Operating Scenario or Batch Process Operating Scenario Step identified above.

If more than one control device of the same type (ex.: venturi scrubber) is utilized in the OS/BPOS Step (i.e. Primary, Secondary, and Tertiary), enter the information for each control device.

CONTROL DEVICE EFFICIENCY TABLE

	1 st Control Device Efficiency			2 nd Control Device Efficiency			3 rd Control Device Efficiency		
Pollutant Category	Efficiency (percent)			Efficiency (percent)			Efficiency (percent)		
	Capture	Removal	Overall	Capture	Removal	Overall	Capture	Removal	Overall
PM-10									
TSP									
VOC									
NO _x									
SO ₂									
CO									
Pb									
HAP(s) (Total)									
Other (Total)									
Individual HAPs/OTHER (speciated below)									

Operating Scenario/BPOS Step: Condenser AIMS-CDO-002

Instructions for filling out the Condenser Operating Scenario/BPOS Step (controls) Information form (details window).

Vapor Pressure

Enter the vapor pressure of each contaminant and the mixture in mmHg.

VAPOR PRESSURE TABLE

Contaminant	Pollutant Category	Vapor Pressure (mmHg)

Operating Scenario/BPOS Step: Oxidizer, Catalytic AIMS-CDO-003

Instructions for filling out the Catalytic Oxidizer Operating Scenario/BPOS Step (controls) Information form (details window).

U/BP	Enter the Emission Unit or Batch Process NJID (whichever applies) the control device information is connected with.
OS/BPOS	Enter the Operating Scenario or Batch Process Operating Scenario NJID (whichever applies) the control device information is connected with.
BPOS Step	Enter the Batch Process Operating Scenario Step NJID the control device information is connected with (if applicable).
CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Maximum Feed Rate	Enter the maximum feed rate to the oxidizer in tons/hr.
Oxygen in Exhaust	Enter the oxygen content in the exhaust in percent oxygen (O ₂).
CO Conc. in Exhaust	Enter the carbon monoxide (CO) concentration in the exhaust in ppmvd.
Total VOC Conc. in Exhaust	Enter the total volatile organic compound (VOC) concentration in the exhaust in ppmvd.

Operating Scenario/BPOS Step: Oxidizer, Thermal AIMS-CDO-004

Instructions for filling out the Thermal Oxidizer Operating Scenario/BPOS Step (controls) Information form (details window).

U/BP	Enter the Emission Unit or Batch Process NJID (whichever applies) the control device information is connected with.
OS/BPOS	Enter the Operating Scenario or Batch Process Operating Scenario NJID (whichever applies) the control device information is connected with.
BPOS Step	Enter the Batch Process Operating Scenario Step NJID the control device information is connected with (if applicable).
CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Maximum Feed Rate	Enter the maximum feed rate to the oxidizer in lbs/hr.
Maximum Flow Rate	Enter the maximum air supply flow rate in acfm.
Minimum Feed Rate	Enter the minimum feed rate to the oxidizer in lbs/hr.
Oxygen in Exhaust	Enter the oxygen content in the exhaust in percent oxygen (O ₂).
CO Conc. in Exhaust	Enter the carbon monoxide (CO) concentration in the exhaust in ppmvd.
Total VOC Conc. in Exhaust	Enter the total volatile organic compound (VOC) concentration in the exhaust in ppmvd.

Operating Scenario/BPOS Step: Scrubber, Multi-Stage AIMS-CDO-005

Instructions for filling out the Multi-Stage Scrubber Operating Scenario/BPOS Step (controls) Information form (details window).

U/BP Enter the Emission Unit or Batch Process NJID (whichever applies) the control device information is connected with.

OS/BPOS Enter the Operating Scenario or Batch Process Operating Scenario NJID (whichever applies) the control device information is connected with.

BPOS Step Enter the Batch Process Operating Scenario Step NJID the control device information is connected with (if applicable).

CD Enter the Control Device NJID of the control device for which the information is being applied to.

POLLUTANT TABLE

Chemical Name	Pollutant Category	Solubility (g/ml of scrubbing media)

Tab:

Scrubbing Medium Table

Liquid Recirc. Method

Enter the liquid recirculation method used from one of the following recirculation types: static, once through, or recirculated.

Liquid Used

Enter the liquid being used for adsorption only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window).

Chemical Additive

Enter the chemical additive used in the scrubbing medium only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window).

Minimum Concentration	Enter the minimum concentration of the chemical additive in percent only if “yes” is entered in : Is the Scrubber Used for Gas Control? (In control device inventory details window).
Maximum Concentration	Enter the maximum concentration of the chemical additive in percent only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window).
How is Activity Maintained?	Enter either “pH” or “oxidation-reduction potential” for maintenance of the activity of the scrubbing medium only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window) and when the Chemical Additive in the Scrubbing Medium is “entered.”
Maximum pH	Enter the maximum pH only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window) and “pH” is entered for Activity Maintained.
Minimum pH	Enter the minimum pH only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window) and “pH” is entered for Activity Maintained.
Max. Redox. Potential	Enter the maximum oxidation-reduction potential only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window) and “oxidation-reduction potential” is entered for Activity Maintained.
Min. Redox. Potential	Enter the minimum oxidation-reduction potential only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window) and “oxidation-reduction potential” is entered for Activity Maintained.

SCRUBBER MEDIUM TABLE

	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5
Liquid Recirc. Method					
Liquid Used					
Chemical Additive					
Minimum Concentration					
Maximum Concentration					
How is Activity					

Maintained?					
Maximum pH					
Minimum pH					
Max. Redox. Potential					
Min. Redox. Potential					

Operating Scenario/BPOS Step: Scrubber (Other, Packed Tower, Venturi)
AIMS-CDO-006

Instructions for filling out the Scrubber (Other, Packed Tower, Venturi) Operating Scenario/BPOS Step (controls) Information form (details window).

U/BP	Enter the Emission Unit or Batch Process NJID (whichever applies) the control device information is connected with.
OS/BPOS	Enter the Operating Scenario or Batch Process Operating Scenario NJID (whichever applies) the control device information is connected with.
BPOS Step	Enter the Batch Process Operating Scenario Step NJID the control device information is connected with (if applicable).
CD	Enter the Control Device NJID of the control device for which the information is being applied to.
Liquid Recirc. Method	Enter the liquid recirculation method used from one of the recirculation types: static, once through, or recirculated.
Liquid Used	Enter the liquid being used for adsorption only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window) .
Chemical Additive	Enter the chemical additive used in the scrubbing medium only if “yes” is entered in: “Is the Scrubber Used for Gas Control?” (In control device inventory information form (details window)).
Minimum Concentration	Enter the minimum concentration of the chemical additive in percent only if “yes” is entered in: “Is the Scrubber Used for Gas Control?” (In control device inventory information form (details window)).
Maximum Concentration	Enter the maximum concentration of the chemical additive in percent only if “yes” is entered in: Is the Scrubber Used for Gas Control? (In control device inventory details window) .
How is Activity Maintained?	Enter either “pH” or “oxidation-reduction potential” for maintenance of the activity of the scrubbing medium only if “yes” is entered in: “Is the Scrubber Used for Gas Control?” (In control device inventory information form (details window)) and when the Chemical Additive in the Scrubbing Medium is “entered.”
Maximum pH	Enter the maximum pH only if “yes” is entered in: “Is the Scrubber Used for Gas Control?” (In control device inventory information form (details window)) and “pH” is entered for Activity Maintained.
Minimum pH	Enter the minimum pH only if “yes” is entered in: “Is the Scrubber Used for Gas Control?” (In control device inventory information form (details window)) and “pH” is entered for Activity Maintained.
Max. Redox. Potential	Enter the maximum oxidation-reduction potential only if “yes” is entered in: “Is the Scrubber Used for Gas Control?” (In control device inventory information form (details window)) and “oxidation-reduction potential” is entered for Activity Maintained.
Min. Redox. Potential	Enter the minimum oxidation-reduction potential only if “yes” is entered in: “Is the Scrubber Used for Gas Control?” (In control device inventory information form (details window)) and “oxidation-reduction potential” is entered for Activity Maintained.

Tab:

POLLUTANT TABLE

Chemical Name	Pollutant Category	Solubility (g/ml of scrubbing media)

APPENDIX E:

Emission Unit/Equipment Operating Scenario Information Form (Details Window) Instructions (Paper Forms)

<u>FORMS</u>	<u>TITLE</u>	<u>PAGE</u>
AIMS-EU-001A	AIR STRIPPER	1
AIMS-EU-001B	SOIL VENTING EQUIPMENT	2
AIMS-EU-001C	SOIL VAPOR EXTRACTION EQUIPMENT – PILOT TEST	3
AIMS-EU-001D	STAGE II GASOLINE STORAGE	6
AIMS-EO-001	ASPHALT MANUFACTURING DRYER	7
AIMS-EO-002	BAKERY OVEN	9
AIMS-EO-003	BOILER	11
AIMS-EO-004	COMBUSTION TURBINE, FUEL COMBUSTION (OTHER EQUIPMENT), AND STATIONARY INTERNAL COMBUSTION ENGINE	17
AIMS-EO-005	ALL DEGREASERS	22
AIMS-EO-006	DUCT BURNER, AND PROCESS HEATER	23
AIMS-EO-007	SURFACE COATING DRYER	26
AIMS-EO-008	EMERGENCY GENERATOR	27
AIMS-EO-009	GLASS MANUFACTURING FURNACE	28
AIMS-EO-010	INCINERATOR	31
AIMS-EO-011	MANUFACUTIRNG AND MATERIALS HANDLING EQUIPMENT	36
AIMS-EO-012	OTHER EQUIPMENT, AND STERILIZERS	38
AIMS-EO-013	PRINTING PRESS (GRAPHIC ARTS)	40
AIMS-EO-014	PRINTING PRESS (NEWSPAPER)	41
AIMS-EO-015	STORAGE VESSEL	42
AIMS-EO-016	SURFACE COATING (FABRIC MATERIAL)	44
AIMS-EO-017	SURFACE COATING (NON-FABRIC MATERIAL)	46

Emission Unit: Air Stripper (AIMS-EU-001A)

Instructions for filling out the Air Stripper Emissions Unit Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Largest Conc. of a Toxic	Enter the largest concentration of a toxic air pollutant as included in NJAC 7:27-17 (Group I) in ppb.
Total Concentration of VOCs	Enter the total concentration of volatile organic compounds (VOCs), which includes toxics and hazardous air pollutants (HAPs) in ppb.
Maximum Flow Rate	Enter the maximum water flow rate in gpm.
Source of Water to be Treated	Enter a source of water to be treated from among the following choices: "groundwater," "wastewater," "potable water treatment," or "other". If "other", describe the other source of water being treated.
Source of Contamination	Enter the source of contamination from among the following choices: "spill," "plant wastewater," "underground storage tank" (UST), or "other". If "other", describe the other source of contamination.
Public Funding?	Enter "yes" if the operation receives public funding. Otherwise, enter "no."
Monitor/Recorder Type	Enter the type of monitor or recorder.
Laboratory Analysis?	Enter "yes" if a laboratory analysis is attached. Otherwise, enter "no." (This should represent the highest level of contamination in the wastewater to be treated).

Emission Unit: Soil Venting Equipment (AIMS-EU-001B)

Instructions for filling out the Soil Venting Equipment Emission Unit Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Remediation Type	Enter the Remediation Type from one of the following choices: Vacuum Extraction, Bioremediation, Soil Washing, or Other. Describe the remediation type if "Other" is entered for "Remediation Type".
Maximum Air Flow Rate	Enter the maximum air flow rate for the operation, in acfm.
Maximum Duration	Enter the maximum duration of the soil venting project.
Units	Enter the units of the project duration from one of the following choices: days, or years.
Public Funding?	Enter "yes" if the project receives public funding. Otherwise, enter "No".
Type of Monitor/Recorder	Enter the type of monitor/Recorder used in the project.
Laboratory Analysis?	Enter "Yes" if you have attached a Laboratory Analysis (This should present the highest level of contamination in the wastewater to be treated.). Otherwise, enter "No".
Comments	Enter any comments.

Emission Unit: Soil Vapor Extraction (SVE) Equipment – Pilot Test
(AIMS-EU-001C)

Instructions for filling out the Soil Vapor Extractor (SVE) Equipment – Pilot Test Emissions Unit Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Site Name	Enter the Remediation Site name
Location of Remediation	Enter the location of the remediation
Pilot Test Designation	Enter the applicant's designation of the pilot test.
Reason for Pilot Test	Enter the reason for the pilot test.
Est. Pilot Test Start Date	Enter the estimated starting date of the pilot test.
Est. Length of Clean-Up	Enter the estimated length of a full clean-up.
Units	Enter the units from one of the following choices: "hours", "days", or "years".
Test on Existing Equipment?	Enter "yes" if this pilot test is on existing SVE equipment. Otherwise, enter "no."
Explain	Enter only when "yes" is entered for Pilot Testing on Existing SVE Equipment.
Type of Contamination	Enter the type of contamination.
Source of Contamination	Enter the source of contamination.
Min. Depth of Contamination	Enter the minimum depth of contamination below the surface, in feet.
Max. Depth of Contamination	Enter the maximum depth of contamination below the surface, in feet.
Max. Vol. of Gas Discharged	Enter the maximum volume of gas discharged, in acfm.
Max. Operating Hours (day)	Enter the maximum operating hours per day.
Max. Operating Hours (test)	Enter the maximum operating hours for the pilot test.
Reason for Length of Test	Enter the reason for the length of the pilot test only when the maximum operating hours for the pilot test is ">8".
Air Injection Performed?	Enter "yes" if air injection will occur. Otherwise, enter "no."
Air Injection Type	Enter the air injection type from one of the following choices: Air Sparging, or Bioventing. Enter a type only when "yes" is entered for Air Injection Performed.
Maximum Injection Rate	Enter the maximum air injection rate in acfm. Enter an injection rate only when "yes" is entered for Air Injection Performed.
Min. Extract. -Inject. Ratio	Enter the minimum vapor extraction to air injection ratio. Enter a Vapor Injection to air injection ratio only when "yes" is entered for Air Injection Performed.

Air Inject. w/o Vapor Extract? Enter "yes" if air injection will occur without simultaneous vapor extraction. Otherwise, enter "no." Enter "yes" or "no" only when "yes" is entered for Air Injection Performed.

Hours Air Inject. per Day Enter the hours of air injection per day only when "yes" is entered for Air Injection without Simultaneous Vapor Extraction.

Depth Below Surface (ft) Enter the depth below the surface where the air injection will take place, in feet, only when "yes" is entered for Air Injection without Simultaneous Vapor Extraction.

Length of Air Injection Project Enter the length of the air injection project only when "yes" is entered for Air Injection without Simultaneous Vapor Extraction.

Purpose of Air Injection Enter the purpose of air injection only when "yes" is entered for Air Injection without Simultaneous Vapor Extraction.

Methods of Monit. Emissions Enter the methods of monitoring emissions.

Comments Enter any comments.

Soil Vapor Extraction (SVE) Table

SOIL VAPOR EXTRACTION TABLE			
If a contamination is from a gasoline spill, contaminants may be listed as Benzene (a Group I TXS) and "Other Petroleum Hydrocarbons."			
If contaminants are NOT from a gasoline spill, list the top five (5) contaminants with their associated information.			
Chemical Name	Pollutant Category	Maximum Concentration of Contaminant in the Vapor Stream Extracted from the soil (ppmv)	Check if this Contaminant is Regulated Under NJAC 7:27-17 (TXS Group I)

Chemical Name Enter the name of the chemical/contaminant being extracted in the operation.

Pollutant Category Enter the chemical's pollutant category from one of the following choices: VOC (Total), or HAP (Total).

Max. Concentration Enter the maximum concentration of the chemical/contaminant in the vapor stream extracted from the soil, in ppmv.

NJAC 7:27-17 (TXS Group 1)? Enter "yes" if the chemical/contaminant is regulated under N.J.A.C. 7:27-17 (TXS Group I). Otherwise, enter "no."

Emission Unit: Stage II Gasoline Storage (AIMS-EU-001D)

Instructions for filling out the Stage II Gasoline Storage , Emissions Unit Information Form (details window).

U Enter the Emission Unit NJID for which the equipment information is being applied to.

E Enter the Equipment NJID of the equipment for which the information is being applied to.

Avg. Annual Throughput Enter the average annual throughput dispensed from all storage vessels in gallons.

For (Annual Average Throughput)/12 (i.e. average monthly throughput) >10,000 gal/mo.:

Type of Stage II Sys. Enter either “vapor balance” or “vacuum assisted,” as a type of stage II recovery system.

CARB Certified? Enter “yes” if these stage II controls are California Air Resources Board (CARB) certified. Otherwise, enter “no.”

If Not, Explain? Enter only when “no” is entered for CARB Certified.

Comments Enter any comments. (optional for an initial operating permit)

Operating Scenario: Asphalt Manufacturing Dryer (AIMS-EO-001)

Instructions for filling out the Asphalt Manufacturing Dryer Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Fuel Information Table Tab:

FUEL INFORMATION TABLE											
Fuel Type		Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year		Flue Gas	
Fuel	Descr.			Value	Units	Value	Units	Value	Units	% O ₂	% Moisture

- Fuel Type:** Enter the type of fuel being burned from one of the following choices: Commercial (list the type. e.g.: No. 2, etc.), "Blend", or "Non-commercial".
- Description** If "Non-commercial" is entered for the "Fuel Type", describe the fuel. (50 characters)
- Sulfur in Fuel (%)** Enter the Sulfur content in the fuel, in percent.
- Ash in Fuel (%)** Enter the Ash content in the fuel, in percent.
- Fuel Heating Value** Enter the heating value for the fuel used.
- Units** Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.
- Maximum Fuel Burned** Enter the maximum amount of fuel burned per year.
- Units** Enter the units of the maximum annual fuel burned from one of the following types: gal/yr., or MMft³/yr.
- Estimated Fuel Burned** Enter the estimated actual amount of fuel burned per year.
- Units** Enter the units of the estimated annual fuel burned from one of the following types: gal/yr., or MMft³/yr.
- O₂ % in Flue Gas** Enter the oxygen content in the flue gas, in percent.
- Moisture % in Flue Gas** Enter the moisture content in the flue gas, in percent.

Tab: Fuel Blend Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Blend”.

FUEL BLEND COMPOSITION TABLE						
Fuel Type		Fuel Heating Value		% Composition in Blend	Sulfur in Fuel (%)	Ash in Fuel (%)
Fuel	Descr.	Value	Units			

Fuel Type:

Enter the types of fuel constituting the blend from the following choices: “Commercial” (list the type. e.g.: No. 2, etc.), or “Non-commercial”,

Description

If “Non-commercial” is entered for the “Fuel Type”, describe the fuel. (50 characters)

Fuel Heating Value

Enter the heating value of each constituent in the fuel blend.

Units

Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.

% Composition in Blend

For each fuel type constituent in the Blend, enter the fuel type’s portion in the Blend, in percent.

Sulfur in Fuel (%)

Enter the Sulfur content of each constituent in the fuel blend, in percent.

Ash in Fuel (%)

Enter the Ash content of each constituent in the fuel blend, in percent.

Tab: Comments**Comments**

Enter any comments.

Operating Scenario: Bakery Oven (AIMS-EO-002)

Instructions for filling out the Bakery Oven Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Tab: Percent Yeast

Baker's Yeast Enter the proportion of baker's yeast, in percent.

Tab: Fuel Information Table

FUEL INFORMATION TABLE											
Fuel Type		Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year		Flue Gas	
Fuel	Descr.			Value	Units	Value	Units	Value	Units	% O ₂	% Moisture

Fuel Type: Enter the type of fuel being burned from one of the following choices: Commercial (list the type. e.g.: No. 2, etc.), "Blend", or "Non-commercial".

Description If "Non-commercial" is entered for the "Fuel Type", describe the fuel. (50 characters)

Sulfur in Fuel (%) Enter the Sulfur content in the fuel, in percent.

Ash in Fuel (%) Enter the Ash content in the fuel, in percent.

Fuel Heating Value Enter the heating value for the fuel used.

Units Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.

Maximum Fuel Burned Enter the maximum amount of fuel burned per year.

Units Enter the units of the maximum annual fuel burned from one of the following types: gal/yr., or MMft³/yr.

Estimated Fuel Burned Enter the estimated actual amount of fuel burned per year.

Units Enter the units of the estimated annual fuel burned from one of the following types: gal/yr., or MMft³/yr.

O₂ % in Flue Gas Enter the oxygen content in the flue gas, in percent.

Moisture % in Flue Gas

Enter the moisture content in the flue gas, in percent.

Tab: Fuel Blend Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Blend”.

FUEL BLEND COMPOSITION TABLE						
Fuel Type		Fuel Heating Value		% Composition in Blend	Sulfur in Fuel (%)	Ash in Fuel (%)
Fuel	Descr.	Value	Units			

Fuel Type:

Enter the types of fuel constituting the blend from the following choices: “Commercial” (list the type. e.g.: No. 2, etc.), or “Non-commercial”.

Description

If “Non-commercial” is entered for the “Fuel Type”, describe the fuel. (50 characters)

Fuel Heating Value

Enter the heating value of each constituent in the fuel blend.

Units

Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.

% Composition in Blend

For each fuel type constituent in the Blend, enter the fuel type’s portion in the Blend, in percent.

Sulfur in Fuel (%)

Enter the Sulfur content of each constituent in the fuel blend, in percent.

Ash in Fuel (%)

Enter the Ash content of each constituent in the fuel blend, in percent.

Tab: Comments

Comments

Enter any comments.

Operating Scenario: Boiler (AIMS-EO-003)

Instructions for filling out the Boiler Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Tab: Fuel Information

FUEL INFORMATION												
Fuel Type			Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year		Flue Gas	
Fuel Cat.	Fuel Type	Descr.			Value	Units	Value	Units	Value	Units	% O ₂	% Moisture

Fuel Blend? Enter “yes” if the fuel is a blend. Otherwise, enter “no”.

Fuel Category If “no” was entered for Fuel Blend, enter the fuel category from one of the following choices: “commercial”, “non-commercial”, or “waste”.

Fuel Type: If “no” was entered for Fuel Blend, enter the type of fuel being burned from one of the following choices:

1. Commercial fuels (list the type. e.g.: No. 2, No. 4, No. 5, No.6, Anthracite Coal, Bituminous Coal, Diesel Fuel, Gasoline, JP4 Jet fuel, JP5 Jet fuel, Kerosene, LPG (Butane), LPG (Propane), Natural Gasoline, or Other);
2. Non-commercial fuels (list the type. e.g.: Blast furnace gas, Butane, Coke, Coke oven gas, landfill gas, Other, Petroleum refinery gas, Propane, or wood); or
3. Waste fuels (list the type. e.g.: Municipal solid waste, Other, Refuse, Waste oil, or waste solvent).

Description If “Other” is entered for the “Fuel Type”, describe the fuel. (50 characters)

Sulfur in Fuel (%) Enter the Sulfur content in the fuel, in percent.

Ash in Fuel (%) Enter the Ash content in the fuel, in percent.

Fuel Heating Value Enter the heating value for the fuel used.

Units Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.

Maximum Fuel Burned Enter the maximum amount of fuel burned per year.

Units Enter the units of the maximum annual fuel burned from one of the following types: gal/yr., or MMft³/yr.

Estimated Fuel Burned Enter the estimated actual amount of fuel burned per year.

Units Enter the units of the estimated annual fuel burned from one of the following types: gal/yr., or MMft³/yr.

O₂ % in Flue Gas Enter the oxygen content in the flue gas, in percent.

Moisture % in Flue Gas Enter the moisture content in the flue gas, in percent.

Tab: Fuel Blend Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Blend” or “Blend (Using Waste)”.

FUEL BLEND COMPOSITION TABLE							
Fuel Type			% Composition in Blend	Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value	
Fuel Cat.	Fuel Type	Descr.				Value	Units

Fuel Category Enter the fuel category from one of the following choices: “commercial”, “non-commercial”, or “waste”.

Fuel Type: Enter the types of fuel constituting the blend from the following choices: “Commercial” (list the type. e.g.: No. 2, etc.), “Waste”, “Non-commercial”, “Landfill Gas”, or “Other.”

Description If “Waste”, “Other” or “Non-commercial” is entered for the “Fuel Type”, describe the fuel. (50 characters)

% Composition in Blend For each fuel type constituent in the Blend, enter the fuel type’s portion in the Blend, in percent.

Sulfur in Fuel (%) Enter the Sulfur content of each constituent in the fuel blend, in percent.

Ash in Fuel (%) Enter the Ash content of each constituent in the fuel blend, in percent.

Fuel Heating Value Enter the heating value of each constituent in the fuel blend.

Units Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.

Tab: Waste Fuel

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”.

Facility Designation of Fuel Enter the facility designation of waste fuel.

Waste Source Enter the waste source (specific process) (i.e., where the waste is generated).

Waste Gen. on Site? Enter “yes” if the waste is generated on site. Otherwise, enter “no.”

Authorized to Accept Waste? Enter “yes” if the site is authorized by the NJDEP to accept waste. Otherwise, enter “no.”

Method of Waste Generation Enter either “batch” or “continuous” for the method of generation of the waste. Enter only when “yes” is entered for the waste being Generated on Site.

Amount Generated per Batch Enter the amount generated per batch only when the Method of Waste Generated entered is “batch”. Include the units used (gallons for liquid Haz. waste and lbs. for solid Haz. waste).

Batches per Year Enter the number of batches per year the waste is generated only when the Method of Waste Generated entered is “batch”.

Amount Generated per Day Enter the amount generated per day only when the Method of Waste Generated entered is “continuous”. Include the units used (gallons for liquid Haz. waste and lbs. for solid Haz. waste).

Amount Generated per Year Enter the amount generated per year only when the Method of Waste Generated entered is “continuous”. Include the units used (gallons for liquid Haz. waste and tons for solid Haz. waste).

Listed Hazardous Waste? Enter “yes” if the waste is a listed hazardous waste. Otherwise, enter “no.”

NJ Haz. Waste Number Enter the NJ Hazardous Waste Number only when “yes” is entered for the waste being a Listed Hazardous Waste.

Waste Type Enter the waste type from one of the following waste types: VOC, Non-VOC, or Mixture.

Flash Point Enter the flash point, in deg. F, only when the Waste Type entered is “hazardous waste (HW)” or “other”.

BS&W (%) Enter the BS&W (Bottoms, Sediments, and Water), in percent volume, only when the Waste Type entered is “hazardous waste (HW)” or “other”.

Max. Waste Burning Rate Enter the maximum waste burning rate.

Units Enter the units from one of the following choices: gal/hr., lbs./hr., tons/day, or tons/hr.

Burn. Rate of Comm. Fuel Enter the burning rate of commercial fuel.

Units Enter the units from one of the following choices: gal/hr., or scf/hr.

Residence Time in Fire Box Enter the residence time in the fire box, in seconds.

Temperature in Fire Box Enter the minimum operating temperature in the fire box, in degrees F.

Min. Destruction Efficiency Enter the boiler’s minimum destruction efficiency of hydrocarbons from the waste stream, in percentage.

Record Keeping Procedures?

Enter “yes” if a diagram of record keeping procedures for monitoring the waste burned, is attached. Otherwise, enter “no.”

Feed Rate Monitored?

Enter “yes” if a description of how the waste feed rate will be continuously monitored, is attached. Otherwise, enter “no.”

Tab: Waste Fuel Constituents Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”. Enter either the Concentration (if percent weight <1, except sulfur) or the Percent by Weight (if sulfur or % weight >1) for each constituent contained in the Waste.

WASTE FUEL CONSTITUENTS TABLE		
Constituents	Concentration (ppmw)	Percent Weight
Total Halogens		
PCBs		
Sulfur		
Arsenic		
Beryllium		
Cadmium		
Chromium		
Lead		
Mercury		
Nickel		
Nitrogen		

Tab: Waste Fuel – Other Constituents Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”.

WASTE FUEL - OTHER CONSTITUENTS TABLE		
Other Constituents (if > 1% by weight)	Concentration (ppmw)	Percent Weight

Tab: Landfill Gas

Landfill Gas Analysis? Enter “yes” if an actual landfill gas analysis is attached. Otherwise, enter “no.”

Gas Generated On Site? Enter “yes” if the landfill gas is generated on site. Otherwise, enter “no.”

Intermed. Storage of Gas? Enter “yes” if there is intermediate storage of landfill gas prior to combustion. Otherwise, enter “no.” Enter only when “yes” is entered for the waste being Generated on Site.

Max. Waste Burning Rate Enter the maximum waste burning rate (i.e. How much landfill gas is being burned?).

Units Enter the burning rate units from one of the following units types: scf/hr., or scf/yr.

Landfill Gas Pretreated? Enter “yes” if the landfill gas is pretreated or cleaned prior to combustion. Otherwise, enter “no.”

Method of Pretreatment Enter the method of pretreatment on the landfill gas only when “yes” is entered for the Landfill Gas being Pretreated or Cleaned.

Tab: Landfill Gas Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Landfill Gas”. Enter ppmvd or wt. % in the Units column, depending upon the concentration level.

LANDFILL GAS COMPOSITION TABLE		
Pollutant	Concentration	Units
Amines		
Chlorides		
CO ₂		
H ₂ S		
Mercaptans		
Mercury		
Methane		
Non-Methane Hydrocarbons		

Tab: Comments

Comments Enter any comments.

Operating Scenario: Combustion Turbine, Fuel Combustion (Other Equipment), and Stationary Internal Combustion Engine (SICE) (AIMS-EO-004)

Instructions for filling out the Combustion Turbine, Fuel Combustion (Other Equipment), and Stationary Internal Combustion Engine Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Tab: Fuel Information Table

FUEL INFORMATION TABLE											
Fuel Type		Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year		Flue Gas	
Fuel	Descr.			Value	Units	Value	Units	Value	Units	% O ₂	% Moisture

- Fuel Type:** Enter the type of fuel being burned from one of the following choices: Commercial (list the type. e.g.: No. 2, etc.), "Waste", "Blend (using Waste)", "Blend", "Non-commercial", "Landfill Gas", or "Other."
- Description** If "Other" or "Non-commercial" is entered for the "Fuel Type", describe the fuel. (50 characters)
- Sulfur in Fuel (%)** Enter the Sulfur content in the fuel, in percent.
- Ash in Fuel (%)** Enter the Ash content in the fuel, in percent.
- Fuel Heating Value** Enter the heating value for the fuel used.
- Units** Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.
- Maximum Fuel Burned** Enter the maximum amount of fuel burned per year.
- Units** Enter the units of the maximum annual fuel burned from one of the following types: gal/yr., or MMft³/yr.
- Estimated Fuel Burned** Enter the estimated actual amount of fuel burned per year.
- Units** Enter the units of the estimated annual fuel burned from one of the following types: gal/yr., or MMft³/yr.
- O₂ % in Flue Gas** Enter the oxygen content in the flue gas, in percent.

Moisture % in Flue Gas

Enter the moisture content in the flue gas, in percent.

Tab: Fuel Blend Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Blend” or “Blend (Using Waste)”.

FUEL BLEND COMPOSITION TABLE						
Fuel Type		Fuel Heating Value		% Composition in Blend	Sulfur in Fuel (%)	Ash in Fuel (%)
Fuel	Descr.	Value	Units			

Fuel Type:

Enter the types of fuel constituting the blend from the following choices: “Commercial” (list the type. e.g.: No. 2, etc.), “Waste”, “Non-commercial”, “Landfill Gas”, or “Other.”

Description

If “Waste”, “Other”, or “Non-commercial” is entered for the “Fuel Type”, describe the fuel. (50 characters)

Fuel Heating Value

Enter the heating value of each constituent in the fuel blend.

Units

Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.

% Composition in Blend

For each fuel type constituent in the Blend, enter the fuel type’s portion in the Blend, in percent.

Sulfur in Fuel (%)

Enter the Sulfur content of each constituent in the fuel blend, in percent.

Ash in Fuel (%)

Enter the Ash content of each constituent in the fuel blend, in percent.

Tab: Waste Fuel

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”.

Facility Designation of Fuel Enter the facility designation of waste fuel.

Waste Source

Enter the waste source (specific process) (i.e., where the waste is generated).

Waste Gen. On Site?

Enter “yes” if the waste is generated on site. Otherwise, enter “no.”

Listed Hazardous Waste?

Enter “yes” if the waste is a listed hazardous waste. Otherwise, enter “no.”

NJ Haz. Waste Number

Enter the NJ Haz. Waste Number only when “yes” is entered for the waste being a Listed Hazardous Waste.

Method of Waste Generation

Enter either “batch” or “continuous” for the method of generation of the waste. Enter only when “yes” is entered for the waste being Generated On Site.

- Amount Generated per Batch** Enter the amount generated per batch only when the Method of Waste Generated entered is "batch". Include the units used (gallons for liquid Haz. waste and lbs. for solid Haz. waste).
- Batches per Year** Enter the number of batches per year the waste is generated only when the Method of Waste Generated entered is "batch".
- Amount Generated per Day** Enter the amount generated per day only when the Method of Waste Generated entered is "continuous". Include the units used (gallons for liquid Haz. waste and lbs. for solid Haz. waste).
- Amount Generated per Year** Enter the amount generated per year only when the Method of Waste Generated entered is "continuous". Include the units used (gallons for liquid Haz. waste and tons for solid Haz. waste).
- Authorized to Accept Waste?** Enter "yes" if the site is authorized by the NJDEP to accept waste. Otherwise, enter "no."
- Waste Type** Enter the waste type from one of the following waste types: VOC, Non-VOC, or Mixture.
- Flash Point** Enter the flash point, in deg. F, only when the Waste Type entered is "hazardous waste (HW)" or "other".
- BS&W (%)** Enter the BS&W (Bottoms, Sediments, and Water), in percent volume, only when the Waste Type entered is "hazardous waste (HW)" or "other".
- Max. Waste Burning Rate** Enter the maximum waste burning rate.
- Units** Enter the units from one of the following choices: gal/hr., lbs./hr., tons/day, or tons/hr.
- Burn. Rate of Comm. Fuel** Enter the burning rate of commercial fuel.
- Units** Enter the units from one of the following choices: gal/hr., or scf/hr.
- Record Keeping Procedures?** Enter "yes" if record keeping procedures for monitoring the waste burned, is attached. Otherwise, enter "no."
- Feed Rate Monitored?** Enter "yes" if a description of how the waste feed rate will be continuously monitored, is attached. Otherwise, enter "no."

Tab: Waste Fuel Constituents Table

Enter values in this Tab only when the "Fuel Type" entered in the Fuel Information Tab is "Waste" or "Blend (Using Waste)". Enter either the Concentration (if percent weight <1, except sulfur) or the Percent by Weight (if sulfur or % weight >1) for each constituent contained in the Waste.

WASTE FUEL CONSTITUENTS TABLE		
Constituents	Concentration (ppmv)	Percent Weight
Total Halogens		
PCBs		

Sulfur		
Arsenic		
Beryllium		
Cadmium		
Chromium		
Lead		
Mercury		
Nickel		
Nitrogen		

Tab: Waste Fuel – Other Constituents Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”.

WASTE FUEL - OTHER CONSTITUENTS TABLE		
Other Constituents (if > 1% by weight)	Concentration (ppmv)	Percent Weight

Tab: Landfill Gas

Landfill Gas Analysis? Enter “yes” if an actual landfill gas analysis is attached. Otherwise, enter “no.”

Gas Generated On Site? Enter “yes” if the landfill gas is generated on site. Otherwise, enter “no.”

Intermed. Storage of Gas? Enter “yes” if there is intermediate storage of landfill gas prior to combustion. Otherwise, enter “no.” Enter only when “yes” is entered for the waste being Generated On Site.

Max. Waste Burning Rate Enter the maximum waste burning rate.

Units Enter the burning rate units from one of the following units types: scf/hr., or scf/yr.

Landfill Gas Pretreated? Enter “yes” if the landfill gas is pretreated or cleaned prior to combustion. Otherwise, enter “no.”

Method of Pretreatment Enter the method of pretreatment on the landfill gas only when “yes” is entered for the Landfill Gas being Pretreated or Cleaned.

Tab: Landfill Gas Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Landfill Gas”. Enter ppmvd or wt. % in the Units column, depending upon the concentration level.

LANDFILL GAS COMPOSITION TABLE		
Pollutant	Concentration	Units
Methane		
Chlorides		
Non-Methane Hydrocarbons		
H ₂ S		
Mercaptans		
Amines		
CO ₂		
Mercury		

Tab: Comments

Comments

Enter any comments.

Operating Scenario: All Degreasers (AIMS-EO-005)

Instructions for filling out the All Degreasers Operating Scenario Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
OS	Enter the Operating Scenario NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Items Being Cleaned	Enter the items being cleaned by the degreaser.

Operating Scenario: Duct Burner, and Process Heater (AIMS-EO-006)

Instructions for filling out the Duct Burner Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Tab: Fuel Information Table

FUEL INFORMATION TABLE											
Fuel Type		Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year		Flue Gas	
Fuel	Descr.			Value	Units	Value	Units	Value	Units	% O ₂	% Moisture

- Fuel Type:** Enter the type of fuel being burned from one of the following choices: Commercial (list the type. e.g.: No. 2, etc.), "Blend", "Non-commercial", "Landfill Gas", or "Other."
- Description** If "Other" or "Non-commercial" is entered for the "Fuel Type", describe the fuel. (50 characters)
- Sulfur in Fuel (%)** Enter the Sulfur content in the fuel, in percent.
- Ash in Fuel (%)** Enter the Ash content in the fuel, in percent.
- Fuel Heating Value** Enter the heating value for the fuel used.
- Units** Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.
- Maximum Fuel Burned** Enter the maximum amount of fuel burned per year.
- Units** Enter the units of the maximum annual fuel burned from one of the following types: gal/yr., or MMft3/yr.
- Estimated Fuel Burned** Enter the estimated actual amount of fuel burned per year.
- Units** Enter the units of the estimated annual fuel burned from one of the following types: gal/yr., or MMft3/yr.
- O2 % in Flue Gas** Enter the oxygen content in the flue gas, in percent.
- Moisture % in Flue Gas** Enter the moisture content in the flue gas, in percent.

Tab: Fuel Blend Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Blend” or “Blend (Using Waste)”.

FUEL BLEND COMPOSITION TABLE						
Fuel Type		Fuel Heating Value		% Composition in Blend	Sulfur in Fuel (%)	Ash in Fuel (%)
Fuel	Descr.	Value	Units			

Fuel Type:	Enter the types of fuel constituting the blend from the following choices: “Commercial” (list the type. e.g.: No. 2, etc.), “Non-commercial”, “Landfill Gas”, or “Other.”
Description	If “Other” or “Non-commercial” is entered for the “Fuel Type”, describe the fuel. (50 characters)
Fuel Heating Value	Enter the heating value of each constituent in the fuel blend.
Units	Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.
% Composition in Blend	For each fuel type constituent in the Blend, enter the fuel type’s portion in the Blend, in percent.
Sulfur in Fuel (%)	Enter the Sulfur content of each constituent in the fuel blend, in percent.
Ash in Fuel (%)	Enter the Ash content of each constituent in the fuel blend, in percent.

Tab: Landfill Gas

Landfill Gas Analysis?	Enter “yes” if an actual landfill gas analysis is attached. Otherwise, enter “no.”
Gas Generated On Site?	Enter “yes” if the landfill gas is generated on site. Otherwise, enter “no.”
Intermed. Storage of Gas?	Enter “yes” if there is intermediate storage of landfill gas prior to combustion. Otherwise, enter “no.” Enter only when “yes” is entered for the waste being Generated On Site.
Max. Waste Burning Rate	Enter the maximum waste burning rate.
Units	Enter the units from one of the following units types: scf/hr, or scf/yr..
Landfill Gas Pretreated?	Enter “yes” if the landfill gas is pretreated or cleaned prior to combustion. Otherwise, Enter “no.”
Method of Pretreatment	Enter the Method of Pretreatment on the landfill gas only when “yes” is entered for the Landfill Gas being Pretreated or Cleaned.

Tab: Landfill Gas Constituents Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Landfill Gas”. Enter ppmvd or wt. % in the Units column, depending upon the concentration level.

LANDFILL GAS CONSTITUENTS TABLE		
Pollutant	Concentration	Units
Methane		
Chlorides		
Non-Methane Hydrocarbons		
H ₂ S		
Mercaptans		
Amines		
CO ₂		
Mercury		

Comments**Enter any comments.**

Operating Scenario: Surface Coating Dryer (AIMS-EO-007)

Instructions for filling out the Surface Coating Dryer Operating Scenario Information Form
(details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
OS	Enter the Operating Scenario NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Operating Temperature	Enter the operating temperature of the dryer in deg F.
% VOC in Coating Emitted	Enter the percentage of total volatile organic compounds (VOC) in coating, which are being emitted during drying, in percent.
Comments	Enter any comments.

Operating Scenario: Emergency Generator (AIMS-EO-008)

Instructions for filling out the Emergency Generator Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Tab: Fuel Information Table

FUEL INFORMATION TABLE									
Fuel Type		Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year	
Fuel	Descr.			Value	Units	Value	Units	Value	Units

- Fuel Type:** Enter the type of fuel being burned from one of the following choices: Commercial (list the type. e.g.: No. 2, N.G., etc.), "Waste", "Blend (using Waste)", "Blend", "Non-commercial", "Landfill Gas", or "Other."
- Description** If "Other" or "Non-commercial" is entered for the "Fuel Type", describe the fuel. (50 characters)
- Sulfur in Fuel (%)** Enter the Sulfur content in the fuel, in percent.
- Ash in Fuel (%)** Enter the Ash content in the fuel, in percent.
- Fuel Heating Value** Enter the heating value for the fuel used.
- Units** Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.
- Maximum Fuel Burned** Enter the maximum amount of fuel burned per year.
- Units** Enter the units of the maximum annual fuel burned from one of the following types: gal/yr., or MMft3/yr.
- Estimated Fuel Burned** Enter the estimated actual amount of fuel burned per year.
- Units** Enter the units of the estimated annual fuel burned from one of the following types: gal/yr., or MMft3/yr.

Operating Scenario: Glass Manufacturing Furnace (AIMS-EO-009)

Instructions for filling out the Glass Manufacturing Furnace Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Tab: Furnace and Glass Information

- Furnace Type** Enter the furnace type (i.e. what type of glass formulation or recipe is produced) from one of the following types: "Borosilicate Recipe", "Soda Lime Recipe", "Textile Fiberglass", "Wool Fiberglass", or "Other".
- Description** Enter a description of the furnace only when the Furnace Type entered is "Other".
- Glass Type** Enter the glass type from one of the following glass types: "pressed", "blown", "commercial container", "specialty container", or "other".
- Description** Enter a description of the glass only when the Glass Type entered is "other".
- Cullet in Feed (%)** Enter the proportion of cullet in the feed, in percent.
- Does the Glass Contain Lead?** Enter "yes" if the glass manufactured contains lead. Otherwise, enter "no."
- Lead in Glass** Enter the proportion of lead in the glass, in percent. Enter only when "yes" is entered for the Glass Containing Lead.
- Electric Boost** Enter the electric boost, in percent, as of the total heat input to the furnace.

Tab: Fuel Information Table

FUEL INFORMATION TABLE											
Fuel Type		Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year		Flue Gas	
Fuel	Descr.			Value	Units	Value	Units	Value	Units	% O ₂	% Moisture

Fuel Type: Enter the type of fuel being burned from one of the following choices: Commercial (list the type. e.g.: No. 2, etc.), "Blend", or "Non-commercial".

Description If "Non-commercial" is entered for the "Fuel Type", describe the fuel (50 characters max.).

Sulfur in Fuel (%) Enter the Sulfur content in the fuel, in percent.

Ash in Fuel (%) Enter the Ash content in the fuel, in percent.

Fuel Heating Value Enter the heating value for the fuel used.

Units Enter the units of the Fuel Heating Value used from one of the following types:
BTU/gal., or BTU/scf.

Maximum Fuel Burned Enter the maximum amount of fuel burned per year.

Units Enter the units of the maximum annual fuel burned from one of the following types:
gal/yr., or MMft3/yr.

Estimated Fuel Burned Enter the estimated actual amount of fuel burned per year.

Units Enter the units of the estimated annual fuel burned from one of the following types:
gal/yr., or MMft3/yr.

O2 % in Flue Gas Enter the oxygen content in the flue gas, in percent.

Moisture % in Flue Gas Enter the moisture content in the flue gas, in percent.

Tab: Fuel Blend Composition Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Blend”.

FUEL BLEND COMPOSITION TABLE						
Fuel Type		Fuel Heating Value		% Composition in Blend	Sulfur in Fuel (%)	Ash in Fuel (%)
Fuel	Descr.	Value	Units			

Fuel Type: Enter the types of fuel constituting the blend from the following choices:
“Commercial” (list the type. e.g.: No. 2, etc.), or “Non-commercial”.

Description If “Non-commercial” is entered for the “Fuel Type”, describe the fuel. (50 characters)

Fuel Heating Value Enter the heating value of each constituent in the fuel blend.

Units Enter the units of the Fuel Heating Value used from one of the following types:
BTU/gal., or BTU/scf.

% Composition in Blend For each fuel type constituent in the Blend, enter the fuel type’s portion in the Blend, in percent.

Sulfur in Fuel (%) Enter the Sulfur content of each constituent in the fuel blend, in percent.

Ash in Fuel (%) Enter the Ash content of each constituent in the fuel blend, in percent.

Tab: Comments

Comments Enter any comments.

Operating Scenario: Incinerator AIMS-EO-010

Instructions for filling out the Incinerator Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.

Tab: Fuel Information Table

FUEL INFORMATION TABLE														
	Fuel Type ₁		Sulfur in Fuel (%)	Ash in Fuel (%)	Fuel Heating Value		Maximum Amount Burned per Year		Estimated Actual Amount Burned per Year		Flue Gas		Minimum Operating Temperature (oF)	Gross Heat Input from the Waste Burned (MMBtu/hr)
	Fuel	Descr.			Value	Units	Value	Units	Value	Units	% O ₂	% Moisture		
Primary Chamber														
Secondary Chamber														

Enter the required information for both the Primary and Secondary chamber.

- Fuel Type:** Enter the type of fuel being burned from one of the following choices: "Commercial" (all types: No. 2, etc.), "Waste", "Blend (using Waste)", "Blend", "Non-commercial", "Landfill Gas", or "Other."
- Description** If "Other" or "Non-commercial" is entered for the "Fuel Type", describe the fuel. (50 characters)
- Sulfur in Fuel (%)** Enter the Sulfur content in the fuel, in percent.
- Ash in Fuel (%)** Enter the Ash content in the fuel, in percent.
- Fuel Heating Value** Enter the heating value for the fuel used.
- Units** Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.
- Maximum Fuel Burned** Enter the maximum amount of fuel burned per year.
- Units** Enter the units of the maximum annual fuel burned from one of the following types: gal/yr., or MMft³/yr.
- Estimated Fuel Burned** Enter the estimated actual amount of fuel burned per year.
- Units** Enter the units of the estimated annual fuel burned from one of the following types: gal/yr., or MMft³/yr.
- O₂ % in Flue Gas** Enter the oxygen content in the flue gas, in percent.
- Moisture % in Flue Gas** Enter the moisture content in the flue gas, in percent.
- Min. Operating Temp.** Enter the minimum temperature that the unit will operate at, in degrees F.

Gross Heat Input from Waste

Enter the maximum Gross Heat Input from the waste being burned in the incinerator, in MMBTU/hr.

Tab: Fuel Blends

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Blend” or “Blend (Using Waste)”.

FUEL BLEND COMPOSITION TABLE						
Fuel Type		Fuel Heating Value		% Composition in Blend	Sulfur in Fuel (%)	Ash in Fuel (%)
Fuel	Descr.	Value	Units			

Fuel Type:

Enter the types of fuel constituting the blend from the following choices: “Commercial” (all types: No. 2, etc.), “Waste”, “Non-commercial”, “Landfill Gas”, or “Other.”

Description

If “Waste”, “Other” or “Non-commercial” is entered for the “Fuel Type”, describe the fuel. (50 characters)

Fuel Heating Value

Enter the heating value of each constituent in the fuel blend.

Units

Enter the units of the Fuel Heating Value used from one of the following types: BTU/gal., or BTU/scf.

% Composition in Blend

For each fuel type constituent in the Blend, enter the fuel type’s portion in the Blend, in percent.

Sulfur in Fuel (%)

Enter the Sulfur content of each constituent in the fuel blend, in percent.

Ash in Fuel (%)

Enter the Ash content of each constituent in the fuel blend, in percent.

Tab: Waste Fuel Being Incinerated

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”.

Waste Type

Enter the waste type from one of the following choices: “MSW”, “RMW”, “HW”, or “Other”. If “Other”, describe the Waste.

Designation

Enter the facility designation of the waste.

Waste Source

Enter the waste source (the specific process). (i.e., where the waste is generated).

Waste On Site?

Enter “yes” if the waste is generated on site. Otherwise, enter “no.”

Listed Hazardous Waste?

Enter “yes” if the waste is a listed hazardous waste. Otherwise, enter “no.”

NJ Haz. Waste Number

Enter the NJ Haz. Waste Number only when “yes” is entered for the waste being a Listed Hazardous Waste.

Method of Waste Generation Enter either “batch” or “continuous” for the method of generation of the waste. Enter only when “yes” is entered for the waste being Generated On Site.

Amount Generated per Batch Enter the amount generated per batch only when the Method of Waste Generated entered is “batch”. Include the units used (gallons for liquid Haz. waste and lbs. for solid Haz. waste).

Batches per Year Enter the number of batches per year the waste is generated only when the Method of Waste Generated entered is “batch”.

Amount Generated per Day Enter the amount generated per day only when the Method of Waste Generated entered is “continuous”. Include the units used (gallons for liquid Haz. waste and lbs. for solid Haz. waste).

Amount Generated per Year Enter the amount generated per year only when the Method of Waste Generated entered is “continuous”. Include the units used (gallons for liquid Haz. waste and tons for solid Haz. waste).

Authorized to Accept Waste? Enter “yes” if the site is authorized by the NJDEP to accept waste. Otherwise, enter “no.”

Flash Point Enter the flash point, in deg. F, only when the Waste Type entered is “hazardous waste (HW)” or “other”.

BS&W Enter the BS&W (Bottoms, Sediments, and Water) , in percent volume, only when the Waste Type entered is “hazardous waste (HW)” or “other”.

Destruct. and Remov. Effic. Enter the overall destruction and removal efficiency of the waste, in percent.

Max. Waste Burning Rate Enter the maximum waste burning rate.

Units Enter the units from one of the following choices: gal/hr, lbs./hr, tons/day, or tons/hr.

Burn. Rate of Comm. Fuel Enter the burning rate of the commercial fuel burned with the waste.

Units Enter the units from one of the following choices: gal/hr, or scf/hr.

Radioactive Materials? Enter “yes” if the waste consists of any radioactive materials. Otherwise, enter “no.”

Record Keeping Procedures? Enter “yes” if record keeping procedures for monitoring the waste burned, is attached. Otherwise, enter “no.”

Feed Rate Monitored? Enter “yes” if a description of how the waste feed rate will be continuously monitored is attached. Otherwise, enter “no.”

Comments Enter any comments.

Tab: Waste Constituents Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”. Enter either the Concentration (if percent weight <1, except sulfur) or the Percent by Weight (if sulfur or % weight >1) for each constituent contained in the Waste.

WASTE CONSTITUENTS TABLE		
Constituents	Concentration (ppmw)	Percent Weight
Total Halogens		
PCBs		

Sulfur		
Arsenic		
Beryllium		
Cadmium		
Chromium		
Lead		
Mercury		
Nickel		
Nitrogen		

Tab: Other Constituents Table

Enter values in this Tab only when the “Fuel Type” entered in the Fuel Information Tab is “Waste” or “Blend (Using Waste)”.

OTHER CONSTITUENTS TABLE		
Other Constituents (if > 1% by weight)	Concentration (ppmv)	Percent Weight

011) Operating Scenario: Manufacturing and Materials Handling Equipment (AIMS-EO-

Instructions for filling out the Manufacturing and Materials Handling Equipment Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.
- Vol. of Gas Discharged** Enter the volume of gas discharged from this source in acfm.

Tab: Contaminant Information

Contaminant	CAS Number	Physical State	Molecular Weight (lbs/lbs-mole)	Does the Material contain VOC's?	Weight Fraction (%)	Vapor Pressure @ 70°F. (mmHg)	Organic Liquid Density	Units

- Contaminant** Enter the chemical name of the contaminant used in the equipment.
- CAS Number** Enter the Chemical Abstracts Service (CAS) registry number of the contaminant.
- Physical State** Enter the physical state of the contaminant from one of the following choices: Solid, Liquid, or Gas.
- Molecular Weight** Enter the molecular weight of the contaminant.
- Does Material Contain VOC's?** Enter "Yes" if the material contains VOC's. Otherwise, enter "No".
- Weight (%)** Enter the contaminant's portion of the total mixture by weight, in percent.
- Vapor Pressure, 70F** Enter the vapor pressure of the contaminant at 70 degrees F, in mmHg, only if the Pollutant Category entered is "VOC".
- Organic Liquid Density** Enter the organic liquid density of the contaminant, in lbs./gal., only if the pollutant category entered is "VOC".
- Units** Enter the organic density units from one of the following choices: lbs/gal, or lbs/ft³.

Operating Scenario: Other Equipment, and Sterilizers (AIMS-EO-012)

Instructions for filling out the Other Equipment, and Sterilizers Operating Scenario Information Form (details window).

- U** Enter the Emission Unit NJID for which the equipment information is being applied to.
- OS** Enter the Operating Scenario NJID for which the equipment information is being applied to.
- E** Enter the Equipment NJID of the equipment for which the information is being applied to.
- Vol. of Gas Discharged** Enter the volume of gas discharged from this source in acfm.

Tab: Contaminant Information

Contaminant	Pollutant Category	Physical State	Vapor Pressure @ 70°F. (mmHg)	Organic Liquid Density (lbs./gal)	% Weight	CAS Number	Molecular Weight

- Contaminant** Enter the chemical name of the contaminant used in the equipment.
- Pollutant Category** Enter the Pollutant Category the contaminant belongs to by choosing one of the following: PM-10, TSP, VOC, NO_x, SO₂, CO, Pb, HAP(s) Total, Other (Total).
- Physical State** Enter the physical state of the contaminant from one of the following choices: Solid, Liquid, or Gas.
- Vapor Pressure, 70F** Enter the vapor pressure of the contaminant at 70 degrees F, in mmHg, only if the Pollutant Category entered is "VOC".
- Organic Liquid Density** Enter the organic liquid density of the contaminant, in lbs./gal., only if the pollutant category entered is "VOC".
- Weight (%)** Enter the contaminant's portion of the total mixture by weight, in percent.
- CAS Number** Enter the Chemical Abstracts Service (CAS) registry number of the contaminant.
- Molecular Weight** Enter the molecular weight of the contaminant.

Operating Scenario: Printing Press (Graphic Arts) (AIMS-EO-013)

Instructions for filling out the Printing Press (Graphic Arts) Operating Scenario Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
OS	Enter the Operating Scenario NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Objects being Coated?	Enter the objects being printed during printing operation.
Material of Objects?	Enter the material of the objects being printed.
VOC Content in Ink	Enter the VOC content in the Ink as applied (after thinning), in lbs./gal.
Type of Ink	Enter the type of Ink being applied.
Max. Ink Used (hr.)	Enter the maximum hourly consumption of Ink, in gal/hr.
Max. Ink Used (day)	Enter the maximum daily consumption of Ink, in gal/day.
Max. Ink Used (yr.)	Enter the maximum annual consumption of Ink, in gal/yr.
Max. % Wgt. VOC in Ink	Enter the maximum weight of VOC solvents in the ink, in percent.
Max. % Wgt. Water in Ink	Enter the maximum weight of water in the ink, in percent.
Max. % Vol. VOC in Ink	Enter the maximum volume of VOC solvents in the ink, in percent.
Max. % Vol. VOC Emitted	Enter the maximum volume of VOC solvents in ink Emitted, in percent.
Max. % Vol. Water in Ink	Enter the maximum volume of water in the ink, in percent.
MSDS for Ink?	Enter "yes" if a material safety data sheet (MSDS) for the ink formulation is attached. Otherwise, enter "no." (optional for an initial operating permit)
Comments	Enter any comments.

Operating Scenario: Printing Press (Newspaper) (AIMS-EO-014)

Instructions for filling out the Printing Press (Newspaper) Operating Scenario Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
OS	Enter the Operating Scenario NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
VOC Content in Ink	Enter the VOC content in the Ink as applied (after thinning), in lbs./gal.
Type of Ink	Enter the type of Ink being applied.
Max. Ink Used (hr.)	Enter the maximum hourly consumption of Ink, in gal/hr.
Max. Ink Used (day)	Enter the maximum daily consumption of Ink, in gal/day.
Max. Ink Used (yr.)	Enter the maximum annual consumption of Ink, in gal/yr.
Max. % Wgt. VOC in Ink	Enter the maximum weight of VOC solvents in the ink, in percent.
Max. % Wgt. Water in Ink	Enter the maximum weight of water in the ink, in percent.
Max. % Vol. VOC in Ink	Enter the maximum volume of VOC solvents in the ink, in percent.
Max. % Vol. VOC Emitted	Enter the maximum volume of VOC solvents in ink Emitted, in percent.
Max. % Vol. Water in Ink	Enter the maximum volume of water in the ink, in percent.
MSDS for Ink?	Enter “yes” if a material safety data sheet (MSDS) for the ink formulation is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments.

Operating Scenario: Storage Vessel (AIMS-EO-015)

Instructions for filling out the Storage Vessel Operating Scenario Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
OS	Enter the Operating Scenario NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Tank Contents	Enter the contents of the tank.
CAS Number	Enter the Chemical Abstracts Service (CAS) registry number of the tank content
Content under Pressure	Enter “yes” if the contents in the storage tank is under pressure. Otherwise, enter “no”.
Pressure	Enter the pressure of the contents, in PSIG, only if “yes” was entered for the contents being under pressure.
Physical State	Enter the physical state of the contents from one of the following choices: “liquid” or “solid”.
Est. Avg. Working Vol.	Enter the estimated average working volume of the storage tank.
Units	Enter the units of the working volume from one of the following choices: “gallons”, “feet ³ ”, “lbs.”, or “tons”.
Minimum Temp.	Enter the estimated minimum storage temperature of the contents in the storage tank, in degrees F.
Maximum Temp.	Enter the estimated maximum storage temperature of the contents in the storage tank, in degrees F.
Average Temp.	Enter the estimated average storage temperature of the contents in the storage tank, in deg. F.
Content have VOC’s?	Enter “yes” if the contents of the storage tank contain VOC’s. Otherwise, enter “no”. Consult the VOC RACT Rule, Subchapter 16 (N.J.A.C. 7:27-16), if unsure the content in the vessel contains a VOC.
Organic Density	Enter the organic density of the contents. Enter the density only if “yes” is entered for VOC contents.
Units	Enter the units of the organic density from one of the following choices: “lbs./gal”, or “lbs/ft ³ ”. Enter the units only if “yes” is entered for VOC contents.
Molecular Weight	Enter the molecular weight of the content, in lbs./lbs.-mole.
Vapor Pressure at Avg.	Enter the vapor pressure of the content at the average storage temperature, in PSIG. Enter the vapor pressure only if “yes” is entered for VOC contents.
Vapor pressure at 70	Enter the vapor pressure of the content at 70 degrees F, in mmHg. Enter the vapor pressure only if “yes” is entered for VOC contents.
Avg. Ann. Throughput	Enter the estimated average annual throughput.

Units

Enter the units for the annual throughput from one of the following choices:
gallons, feet³, lbs. or tons.

Max. Ann. Throughput

Enter the estimated maximum annual throughput.

Units

Enter the units for the annual throughput from one of the following choices:
gallons, feet³, lbs. or tons.

Operating Scenario: Surface Coating - Fabric Material (FM) (AIMS-EO-016)

Instructions for filling out the Surface Coating - Fabric Material (FM) Operating Scenario Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
OS	Enter the Operating Scenario NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Material being Coated?	Enter the material being coated from one of the following choices: "Cotton", "Cotton & Synthetic", "Synthetic", or "other". If "other", describe the material.
VOC Content in Coating	Enter the VOC content in the coating, as applied, in lbs./gal.
Fabric Weight	Enter the weight of the fabric being coated, in ounces per yard (oz/yd)
Wet Pick-Up (%)	Enter the Wet pick-Up, in percent.
Type of Coating	Enter the type of coating being applied.
Max. Coating Used (hr.)	Enter the maximum hourly consumption of coating, in gal/hr.
Max. Coating Used (day)	Enter the maximum daily consumption of coating, in gal/day.
Max. Coating Used (yr.)	Enter the maximum annual consumption of coating, in gal/yr.
VOC Content in Coating	Enter the VOC content in the coating formulation, in lbs./batch.
Dry Solids Content	Enter the Dry Solids content in the coating formulation, in lbs./batch.
Resin Content in Coating (%)	Enter the Resin content in the coating formulation, in percent.
Type of Resin	Enter the type of Resin used in the coating formulation.
Max. % Wgt. VOC in Coating	Enter the maximum weight of VOC solvents in the coating, in percent.
Max. % Wgt. Solids in Coating	Enter the maximum weight of solids in the coating, in percent.
Max. % Wgt. Water in Coating	Enter the maximum weight of water in the coating, in percent.
Max. % Vol. VOC in Coating	Enter the maximum volume of VOC solvents in the coating, in percent.
Max. % Vol. Solids in Coating	Enter the maximum volume of solids in the coating, in percent.
Max. % Vol. Water in Coating	Enter the maximum volume of water in the coating, in percent.
Fabric Throughput	Enter the Fabric Throughput in the coating operation, in yards per minute.
Cooling Air	Enter the cooling air in the coating operation, in acfm.
Fabric per 100 lbs. of Coating	Enter the yards of fabric per 100 lbs. of Coating formulation.
Operating Hours per Day	Enter the operating hours of the coating operation per day.
Operating Hours per Week	Enter the operating hours of the coating operation per week.

MSDS for Solution?

Enter “yes” if a material safety data sheet (MSDS) for the coating formulation is attached. Otherwise, enter “no.” (optional for an initial operating permit)

Operating Scenario: Surface Coating – Non-Fabric Material (NFM)
(AIMS-EO-017)

Instructions for filling out the Surface Coating - Non-Fabric Material (NFM) Operating Scenario Information Form (details window).

U	Enter the Emission Unit NJID for which the equipment information is being applied to.
OS	Enter the Operating Scenario NJID for which the equipment information is being applied to.
E	Enter the Equipment NJID of the equipment for which the information is being applied to.
Objects being Coated?	Enter the objects being coated.
Material of Objects	Enter the material of the objects being coated from one of the following choices: “Metallic”, or “Non-Metallic”.
VOC Content in Coating	Enter the VOC content in the coating (after thinning), as applied, in lbs./gal.
Density of Coating	Enter the Density of the coating being applied (after thinning), in lbs./gal.
Type of Coating	Enter the type of coating being applied.
Max. Coating Used (hr.)	Enter the maximum hourly consumption of coating, in gal/hr.
Max. Coating Used (day)	Enter the maximum daily consumption of coating, in gal/day.
Max. Coating Used (yr.)	Enter the maximum annual consumption of coating, in gal/yr.
% VOC in Coating Emitted	Enter the percent of VOC in the coating emitted during the coating process.
Percent Overspray	Enter the fraction of the solids component of the Coating Material that does not adhere to the object when the Coating is sprayed, in percent.
Max. % Wgt. VOC in Coating	Enter the maximum weight of VOC solvents in the coating, in percent.
Max. % Wgt. Solids in Coating	Enter the maximum weight of solids in the coating, in percent.
Max. % Wgt. Water in Coating	Enter the maximum weight of water in the coating, in percent.
Max. % Vol. VOC in Coating	Enter the maximum volume of VOC solvents in the coating, in percent.
Max. % Vol. Solids in Coating	Enter the maximum volume of solids in the coating, in percent.
Max. % Vol. Water in Coating	Enter the maximum volume of water in the coating, in percent.
Operating Hours per Day	Enter the operating hours of the coating operation per day.
Operating Hours per Week	Enter the operating hours of the coating operation per week.
MSDS for Coating?	Enter “yes” if a material safety data sheet (MSDS) for the coating formulation is attached. Otherwise, enter “no.” (optional for an initial operating permit)
Comments	Enter any comments. (optional for an initial operating permit)

Appendix F:

Compliance Plan Codes

<u>CODE TYPE</u>	<u>TABLE</u>	<u>PAGE</u>
C	MONITORING METHOD	1
D	FREQUENCY	2
E	COMPLIANCE STATUS	3
F	SCHEDULE	3
G	RECORDKEEPING METHOD	5
I	AVERAGING PERIOD	5
J	SUBMITTAL ACTION TYPE	6

COMPLIANCE PLAN CODES

Table **MONITORING_METHOD**

MONITORING METHOD CODE	MONITORING METHOD DESCRIPTION
CHAR(4)	VARCHAR2(30)
C000	no monitoring method
C001	stack emission testing
C002	continuous emission monitor
C003	carbon adsorption breakthrough monitor
C004	continuous opacity monitor
C005	temperature instrument
C006	scrubber flow rate instrument
C007	pressure drop Instrument
C008	material balance
C009	periodic leak detection monitoring
C010	gravimetric monitoring
C011	odor threshold monitoring
C012	visual determination
C013	pH instrument
C014	fuel flow/firing rate instrument
C015	flue gas flow rate instrument
C016	hour/time monitor
C017	periodic emission monitoring (portable instrument)
C018	parametric monitoring system
C019	fuel sampling (e.g. oil)
C020	fuel sampling (e.g. coal)
C021	fuel sampling (e.g. gas)
C022	VOC coating sampling
C023	ink sampling
C024	product sampling (provide description)
C025	sludge sampling
C026	sludge feed/charge rate monitoring
C027	waste feed/charge rate monitoring (liquid)
C028	waste feed/charge rate monitoring (solid)
C029	waste feed/charge rate monitoring (gas)
C030	wastewater sampling
C031	noncommercial fuel sampling
C032	material feed/flow monitoring
C033	gas sampling
C034	pressure (indicator)
C035	waste feed sampling
C036	grab sampling
C037	scrubbing medium sampling
C038	oxidation/reduction potential meter
C039	gas flow rate instrument
C040	specific gravity monitoring instrument
C041	integrated steam flow monitor
C042	air-to-fuel monitoring device
C043	gas use totalizing meter

C044	electric usage meter
C045	flame monitor
C048	volt meter
C049	amp meter
C050	periodic emissions monitoring (flux chamber, or as approved)
C051	vapor-tightness testing
C052	documentation of construction
C054	formulation data
C055	surface tension meter (stalogramometer or tensiometer)
C056	hoist speed
C400	flue gas sampling
C500	other method (provide description)
C501	ambient pathogens monitoring
C502	ambient Beryllium monitoring
C503	water-to-fuel monitoring device
C504	steam-to-fuel monitoring device
C600	calculations
C601	gap width measurement
C610	scrubber liquor sampling (ASTM Method 3695-88)
C620	liquid level indicator
C630	removal efficiency method (40 CFR 60.363(d)(1))
C640	weighted average VOC content calculations
C999	Not Applicable

Table FREQUENCY

FREQUENCY CODE	FREQUENCY DESCRIPTION
CHAR(4)	VARCHAR2(30)
D000	at no required frequency
D001	each quarter hour during operation
D002	each half hour during operation
D003	each hour during operation
D004	once per shift during operation
D005	once per batch during operation
D006	each week during operation
D007	each month during operation
D008	quarterly: once per quarter; quarters shall begin on January 1, April 1, July 1, and October 1 of each year
D009	semiannually: once every six months; six month cycle shall begin on January 1 and July 1 of each year
D010	annually: once per calendar year
D011	initial calculations only
D012	continuously
D013	once initially
D014	every 5 years
D015	upon request of the Department
D016	per change of material
D017	once per calendar day during operation
D018	prior to and after each experiment

D020	biweekly
D021	every 8 hours
D022	4 times a year
D023	twice a year
D026	during the entire loading cycle
D027	every 15 minutes
D028	every 4 hours
D030	semiannually: once every six months; six month cycle shall begin on the date of initial testing
D040	12 months prior to compliance date
D041	18 months prior to compliance date
D042	150 operating days after compliance date
D050	upon occurrence of event
D060	once per bulk fuel shipment
D070	for 2 years from date of permit
D080	once initially and every 5 years
D081	once initially and per change of material
D100	daily
D200	upon installation of the control device, prior to filling
D500	at the approved frequency
D999	Not Applicable

Table COMPLIANCE_STATUS

COMPLIANCE STATUS CODE	COMPLIANCE STATUS DESCRIPTION
CHAR(4)	VARCHAR2(30)
E001	In compliance and will continue to comply with this requirement
E002	Currently not in compliance with applicable requirements but meeting scheduled increments in the compliance schedule contained in an Order, ACO, or Stipulation of Settlement. (Attach a copy of the signed Order, ACO, or Stipulation of Settlement)
E003	In compliance with an applicable requirement because the equipment is out of service
E004	Not in compliance, but a compliance schedule is provided in Section 96
E005	Currently not in c
E006	Will be in compliance with an applicable requirement that will become applicable after the Operating Permit Applications submitted
E007	Will not be in compliance with this requirement that will become applicable to the facility after the Operating Permit application is submitted. Provide the effective date of the requirement, and a compliance schedule in Section 96
E008	Use only for future compliance dates. (Complete Section 96B or 97)
E009	Exempt (Complete CP-08 and Section 97)
E999	Not Applicable

Table SCHEDULE

SCHEDULE CODE	SCHEDULE DESCRIPTION
CHAR(4)	VARCHAR2(30)
F001	Every month beginning on the first day of the second month following the effective date of the approved permit
F002	Every quarter (three months) beginning on the first of the month of the first full quarter following the effective date of the approved permit. Quarters shall begin on January 1, April 1, July 1, and October 1 of each year
F003	Every six months beginning on the first of the month, three months after the effective date of the approved permit. The six month cycles shall begin on January 1 and, July 1 of each year
F004	Every year beginning on the first of January, three months following the effective date of the approved permit
F005	At an other approved schedule (Provide description on Form CP-08)
F006	As per the approved schedule
F008	Within 60 days of stack testing
F009	At a common schedule agreed upon by the operator and the Administrator
F010	Within 60 days of sampling
F011	Semi-annually on January 31 and July 31 of each year
F012	Every April 1 for the previous year
F013	Every April 30, July 30, October 30, and January 30 for the preceeding quarter year. The quarter years begin on January 1, April 1, July 1, and October 1
F014	12 month after compliance date
F015	12 months from the date of initial fill
F016	Telephone/written notification (26.2(e))
F017	Within 15 calendar days from detection
F018	Within 30 calendar days from identification
F019	Every month
F020	Once initially
F021	Upon occurrence of event
F022	Semiannually beginning within 6 months of initial start-up
F027	Within 10 days of the start of maintenance
F028	Within 360 days of initial startup of the affected facility
F029	Annually
F030	Once initially, or upon closure
F031	Within 2 working days
F040	Every quarter beginning on the 30th of the 3rd month following initial performance tests
F050	Semi-annually beginning on the 30th day of the 6th month following initial performance tests
F060	Every 30 days
F070	By the close of the next business day
F080	Within 30 days from the date of the approved permit
F090	Within 60 days from the date of the approved permit
F100	Within 90 days from the date of the approved permit
F105	Within 120 days from the date of the approved permit
F110	Within 180 days from the date of the approved permit
F115	Within 210 days from the date of the approved permit

F120	Within 270 days from the date of the approved permit
F130	Within 360 days from the date of the approved permit
F999	Not Applicable

Table RECORDKEEPING METHOD

RECORDKEEPING METHOD CODE	RECORDKEEPING METHOD DESCRIPTION
CHAR(4)	VARCHAR2(30)
G000	no recordkeeping method required
G001	manual logging of parameter
G002	strip chart
G003	round chart
G004	data acquisition system (DAS) /electronic data storage
G005	stack test results
G006	certified lab analysis results
G007	production records
G008	invoices / bills of lading
G009	fuel certification receipts
G010	record of Emission Statement data
G011	strip chart, round chart or data acquisition (DAS) system / electronic data storage
G500	other recordkeeping method (provide description)
G600	records of calculations based on 40 CFR 61.54(d)
G601	records of calculations based on 40 CFR 60.154(b)
G602	records of calculations based on 40 CFR 60.154(d)
G620	odor panel results
G650	records of calculations based on 40 CFR 60.752(a)
G651	records of calculations based on 40 CFR 60.754(a)
G750	fuel supplier certifications pursuant to 40 CFR Part 60.48c(f)
G999	Not Applicable

Table AVERAGING PERIOD

AVERAGING PERIOD CODE	AVERAGING PERIOD DESCRIPTION
CHAR(4)	VARCHAR2(30)
I000	no averaging period
I001	an instantaneous determination
I002	1 minute intervals
I003	3 minute intervals
I004	5 minute intervals
I005	15 minute intervals
I006	a 1 hour block average
I007	a 3 hour rolling average based on a 1 hour block average
I008	a 4 hour rolling average based on a 1 hour block average
I009	an 8 hour rolling average based on a 1 hour block average
I010	a 24 hour rolling average based on a 1 hour block average

I011	one calendar day
I012	a three working day average
I013	a 96 hour rolling average based on a 1 hour block average
I014	ozone season (May 1 to September 15)
I015	a 12 calendar month average
I030	a 30 minutes average
I031	a 3 hour rolling average
I032	a 30 day rolling average
I033	6 minute blocks
I034	the average of three 1-hour tests
I035	a 7 day rolling average
I036	the averaging period as per Department approved test method
I037	a batch cycle average
I038	a weighted 12 month average
I039	a 1 month average
I040	the average over the length of the cycle
I041	a 10 seconds average
I042	a 1 hour rolling average (rolling 1 minute basis)
I043	a rolling 14 day period of operating days
I044	one calendar month
I045	a daily average
I047	a 6-hour block average
I048	5-minute blocks
I049	the average over the loading cycle
I050	the average of three cycles
I051	a 24 hour period
I052	a 30 day period
I053	the averaging period as per approved sampling protocol
I054	a 7 day average
I055	a 3 hour test
I056	a 3 hour block average
I057	a 12 month rolling average (rolling 1 month basis)
I058	a rolling 30 day average (rolling 1 day basis)
I059	a 3-day rolling average
I060	the average of three tests
I061	a rolling 1 hour average
I062	a 3-cycle block average
I063	a 3 hour average (6 minute block basis)
I065	a 2 hour period
I066	any 60 minute period
I070	a monthly volume-weighted average
I500	an other averaging period (describe)
I999	Not Applicable

Table SUBMITTAL ACTION TYPE

SUBMITTAL ACTION TYPE CODE	SUBMITTAL ACTION TYPE DESCRIPTION
CHAR(4)	VARCHAR2(30)
J000	No submittal or action required

J001	Submit a report
J002	Submit a stack test protocol
J003	Submit a stack test report
J004	Submit an equipment protocol
J005	Submit a performance test protocol
J006	Submit an Excess Emission Report (EEMPR)
J007	Submit an Annual Emission Statement
J008	Submit an Annual Compliance Certification
J009	Submit documentation of compliance
J010	Conduct a stack test
J011	Conduct a performance test
J012	Purchase equipment
J013	Install equipment
J014	Perform tune-up
J015	Obtain an approved permit
J016	Cease operation or comply
J017	Obtain approval
J018	Demonstrate compliance
J019	Submit a certification
J020	Submit test results
J021	Stack Test - Submit protocol, conduct test and submit results
J022	CEM - Submit equipment protocol, conduct PST test and submit results
J023	Submit notification
J024	Repair equipment
J025	Conduct an inspection
J026	Submit recordkeeping format
J027	Submit a plan
J028	Conduct a performance evaluation and calibration check
J029	Notify by phone
J999	Not Applicable